



## Inspection Report on

**Glascoed Ltd**

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

## **Date Inspection Completed**

*27/06/2024*

**Welsh Government © Crown copyright 2024.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## 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	<a href="#">5 December 2022</a>
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

People are happy living in Glascoed and describe it as a small, homely care home. Care is person centred as care plans capture what people want to achieve, what they can do for themselves and how they want to be supported. They have choice and control of how and where they spend their day, their daily routines and food preferences. Activities are provided if people want to partake. The home is clean, tidy, and decorated on an ongoing basis and there is an accessible south facing garden for people to sit in. There is a recently serviced lift and stair lifts so people can choose how they want to access the first floor. Bedrooms are personalised, reflecting each person's interests and what is important to them. Care staff are trained in a range of relevant topics to help ensure they deliver the best support, however we found insufficient evidence of safe recruitment procedures which must be addressed immediately. The responsible individual has delegated some auditing responsibilities to the newly appointed manager, but they will also need to ensure a quality-of-care review is completed every six months.

## Well-being

People have control over their day-to-day life. People said their views are listened to and preferences accommodated. Care documentation details how people want to be supported and how they like to carry out their daily routine for example, the time they like to go to bed and get up in the morning. People choose what they want to eat and when they would prefer their hot meal to be served. There is only one Welsh speaking staff at present and documents are in English only unless requested in the Welsh language.

People's physical and mental health is monitored closely, and professional advice and support is sought swiftly when needed. People are supported to keep healthy by doing things such as walking around the home, into the back garden, and outside in the local areas. People are happy and do things that make them happy; say they can choose where they would like to spend their day and what they want to do. Staff are quick to alert health professionals if there are any concerns regarding people's health.

People are protected from abuse and neglect because the service ensures all staff are trained on the subject. There are policies and procedures in place to guide staff so they all know what to do should they have any concerns about people in their care. Staff know the residents very well, most having worked here for many years; they have formed good relationships with residents so open and honest conversations are the norm.

People are supported to continue their domestic, family and personal relationships. Couples can share their room so that they can continue to benefit from each other's company; one person has a dog and takes them frequently for walks. Visitors come and go, so people retain their relationships with those who matter to them. They are stimulated and happy to see their friends and family.

People describe the home as homely and comfortable. There is a family atmosphere and lots of friendly chat between staff and the people who live here. Rooms are bright and airy as large windows let in the light, and everybody can access the south facing garden to sit in the sunshine. On a normal day people are happy eating from their individual tables at their armchairs, but a large table is brought out for special occasions such as Christmas lunch and celebrations.

## Care and Support

Prior to coming into the service, the service provider collates information from a wide range of sources to be sure the service can meet the person's needs and help them achieve their outcomes. We saw information is gained from health professionals and social care services as well as families and the people themselves. The service has a clear idea of the person's needs prior to admission and knows that it can meet them.

There is a clear plan for how care is to be provided to meet people's needs. We saw plans are person centred and inform staff of a person's needs and preferences from their perspective. It is clear these are completed with the people coming to live in the service. Plans are strengths based, indicating what people can do for themselves so as not to take away their independence. Outcomes are clearly identified, so everybody involved in providing care and support knows what the person is trying to achieve. We saw plans are reviewed every month to keep them accurate and up to date.

The service provides good quality care and support to help people achieve their outcomes. Staff read the care plans and respect peoples documented personal wishes and aspirations; people do what they want to do in the way that they want to do it. We spoke to people who enjoy the flexibility of daily routines such as getting up and going to bed at their preferred times. People told us they liked the choice they have in all areas; they never feel pushed into doing things they don't want to do, such as joining in activities when they prefer their own company. People praised the food, one person saying it is too good as they had put on weight since coming here. Everyone told us how kind and caring staff are. An activities coordinator has recently been employed, and people living in the home are enjoying the bingo and quizzes and occasional trips out.

People are supported to access healthcare and other services to keep them healthy and maintain their well-being. We saw examples of people's progress since moving into the home, growing in confidence in their own abilities and becoming more independent in their mobility. We spoke to people who feel they have progressed and could now do more for themselves. A visiting health professional told us how the service is quick to alert health services of any issues; they know the residents well and can quickly identify any problems.

## Environment

People enjoy the homely environment provided at Glascoed. Bedrooms are welcoming, individualised and reflect people's interests and preferences. Some people prefer to spend their time in their rooms surrounded by things that are important to them and enjoying their own company watching their own televisions. In the lounge, people can dine, they can meet and join in the activities, listen to the singer who visits every week or watch their favourite shows together. We visited during the European Football Championship and the fixtures of matches were written on a whiteboard in the lounge for everyone to see. Flags were displayed denoting favourite teams. There is a lift which has recently been serviced as well as stairlift for people to access the first floor. There are assisted showers and toilets with raised seats and most people have en suite facilities. Everywhere is clean and tidy and maintained. There are some areas that need repainting, such as where wheelchairs and other aids have collided with woodwork, but decoration is ongoing. The garden is well maintained and provides seating for people to use and there are ramps for easy access in and out of the home.

A range of checks routinely take place to ensure the building is kept safe and free from hazards and complies with guidance on health and safety. We saw the required tests and servicing for electrical installation, gas safety, portable electrical appliances and fire safety certificate are all complete and up to date. The provider has allowed testing of safe water temperatures to lapse but is rectifying this immediately, resuming weekly records.

## Leadership and Management

The provider is also the responsible individual who oversees the service. They are supported by a manager who has skills from their previous management of domiciliary care services; they are enhancing their knowledge so as to be fully registered as a manager of a care home. Both the manager and responsible individual are available daily through the week to support and advise staff and ensure the service is running smoothly. Staff are guided by a full range of policies and procedures which are kept under review. There are insufficient checks and measures of procedures and records, however, the provider has now delegated auditing responsibilities to the manager who is putting together a schedule to ensure this is done routinely; the responsible individual will complete some of these on their formal, recorded three monthly visits.

There are inadequate quality assurance processes in place at present. Whilst people told us they feel very comfortable expressing their views when they wish, there are no formal opportunities for them to do so in a more considered way or anonymously. There are no formally arranged residents' meetings in which views of the group could be sought; there are no questionnaires or surveys routinely issued to people using the service, their relatives or professionals; the responsible individual has not completed a quality of care review for over a year to illustrate how they know what is working well and where further improvements might be made. The responsible individual is always present so has good oversight of the operation, but a more in-depth evaluation of the service needs to be done. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The service operates with appropriate numbers of staff to ensure people's needs are met and they are well supported to achieve their outcomes. Care staff are prompt to respond to call alarms and have an unhurried approach to their care giving. Training records show staff are instructed in a good range of relevant topics and their competence in administering medication checked. Staff have worked in the home for a long time and told us how the provider makes them feel valued. We found insufficient information in personnel files to evidence staff have been safely recruited. One staff file has no references from previous employers nor disclosure certificate from the DBS (the Disclosure and Barring Service). Several others had one or both these documents missing. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
35	Personnel files are incomplete; there is insufficient and inadequate evidence to show staff have been safely recruited. The RI must ensure evidence of all checks and all required documents in respect of each employee is present in the home and available for inspection.	New

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
80	There are inadequate quality assurance processes in place to ensure the service is running as safely, compliantly and effectively as it needs to be to help people achieve their outcomes. The provider must ensure there are robust quality assurance systems in place.	New
68	Regulation 68 (1) - the RI must appoint a manager who is registered with Social Care Wales.	Achieved

### **Was this report helpful?**

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

**Date Published** 25/07/2024