



Inspection Report on

Glamorgan Care Ltd, Danygraig House

**Glamorgan Care Ltd
Danygraig
Porthcawl
CF36 5SR**

Date Inspection Completed

31/01/2023

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About Glamorgan Care Ltd, Danygraig House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Glamorgan Care Limited
Registered places	48
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] 13.01.2022
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Danygraig has a warm, welcoming atmosphere and people feel at home in their surroundings. Personal plans highlight people's individual outcomes and are clear and person centred. People are encouraged to make daily choices and can undertake activities they enjoy. Meals are of a good standard and appear varied. Medication is administered and recorded effectively. Adequate staffing supports people to receive care in a timely manner. Care staff offer support in a friendly person-centred way and understand individual needs and preferences. People live in a safe, secure environment. The accommodation is comfortable and homely. People have access to private and communal areas, which are spacious, thoughtfully adapted and overall, nicely presented. The home's equipment and facilities are clean and appropriately maintained. Ongoing training and supervision help care workers develop in their roles. Policies in place support good practice. The responsible individual (RI) is engaged and committed to the ongoing development of the service. Quality assurance reports and RI visits are completed in line with regulations. Staff understand their safeguarding responsibilities and notable events are reported appropriately.

Well-being

People are treated with dignity and respect. We observed positive interactions between people and care workers throughout the inspection. We could see people and care workers have a genuine good rapport and care workers are familiar with people's needs and the best ways of providing care and support. Positive feedback from people and their representatives regarding the quality of care provided supported our observations. A relative told us "*there's a good programme of activities, they keep their minds active*".

The service considers people's physical and mental health. Personal plans we sampled reflect each person's support needs and ongoing reviews ensure plans remain current. Staff told us they have access to plans and are aware of people's health needs and how to support them. Routine appointments and timely referrals ensure people remain as well as they can be. Sufficient numbers of staff support people to receive the right care at the right time. Personal plans identify people's health needs and any potential risks to their well-being. People told us they feel settled within the service and have positive relationships with staff. Nutritional needs are considered. Seasonal events and special occasions are celebrated, and people have things to look forward to. Effective medication management ensures people receive medication as prescribed.

A homely environment supports people's well-being. Our observations indicated they felt secure, safe and relaxed within the home. The home is clean, suitably furnished and decorated appropriately throughout. People's bedrooms are individualised and communal areas provide comfort. The home is maintained to a high standard. Routine health and safety checks as well as regular servicing of equipment and utilities ensures the environment is safe.

People are protected from harm and abuse. There are policies and procedures in place underpinning safe practice. Care workers are trained to meet the needs of the people they support and can spot the signs of abuse, neglect, poor health, and act accordingly. Care workers we spoke to said they feel confident any issues raised with the manager will be actioned promptly. There is a safe recruitment process and staff are supported within their roles.

Care and Support

People benefit from a good standard of care and support. A person centred approach to care planning ensures people are central to the care and support they receive. Personal plans highlight people's outcomes and provide care workers with clear instructions regarding care delivery. Robust risk assessments and management plans identify people's vulnerabilities and give care workers guidance on interventions that will keep people safe. Regular reviews ensure documents remain up to date and daily notes reflect the care and support provided by staff. People we spoke with are happy in the service and are complimentary about the support they receive. Comments included "*I'm in my element here, I've never looked back*" and "*they are very helpful*".

People are supported to remain as healthy as possible. We saw personal plans contained documented information that suggests people have good access to additional health and social care services. Medication is stored safely and administered in line with the prescriber's recommendations. We examined medication administration records (MAR) and found them to be completed correctly with no gaps in signatures. Staff carry out the relevant medication storage temperature checks on a daily basis. Controlled medication is also appropriately stored and recorded.

The service supports people to maintain a suitable diet. Meals are freshly prepared, and we found that meals are well presented and served efficiently. People told us that they enjoyed the meals and could always have something different if they wished. A relative said, "*the food is excellent*". We found that catering staff are aware of people's dietary requirements. This information is available within the kitchen and within care records. We saw that people are provided with food and drink that is prepared according to their individual needs. People confirmed they have plenty to eat and drink throughout the day and are offered choice. One person said, "*what they do for us is marvellous*".

The service listens to people's views about their meals and makes changes to improve their experiences. We saw care workers assisting people with their meals in a dignified, sensitive way. Care workers monitor people's weight and keep clear records regarding people's dietary and fluid intake.

There are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. On the day of inspection, the atmosphere in the service was friendly and relaxed with people appearing at ease when engaging with staff. One person told us how they enjoyed a variety of activities and showed us their bedroom, which they are very happy with. Family members were complimentary about the service describing the care as "*it's excellent here*", "*carers are wonderful*", "*absolutely wonderful*" and "*there is good stimulation*".

Environment

The service is set over two floors and can accommodate up to 48 people. People's rooms are decorated to their preference, furnished appropriately and contain items that are important to them. Most bedrooms benefit from ensuite bathroom facilities. Communal areas within the home are clean and comfortable. The Food Standards Agency has awarded the kitchen a score of 5, this suggests very good standards of hygiene. There are extensive well-kept garden areas where people can sit or take part in activities. There is also a sensory garden, where people can relax. We saw the laundry facilities, which are suitable to meet the needs of people living in the home. Effective daily cleaning schedules are in place as all parts of the home are clean, tidy and well organised.

Records show the service is safe from unauthorised access and maintenance checks are carried out. All visitors are asked for identification and to sign the visitors book before entering. Records show electrical, gas and general safety checks are completed. Fire safety checks and drills are completed regularly. Personal emergency evacuation plans (PEEP's) ensure care workers understand the level of support people require in the event of an emergency. Substances hazardous to health are stored securely. All confidential records are safely stored and only available to care workers who are authorised to view them. Clear infection control procedures are in place.

Leadership and Management

There are systems and processes in place to monitor, review and improve the quality of care and support provided. We saw evidence that the manager and RI have good oversight of the service. We looked at documentation, which confirmed formal quarterly visits take place. On a six-monthly basis, the RI produces a quality of care report. The service also offers various formal and informal opportunities for people and their representatives, to ask questions and give feedback. We found people; family and professionals give positive feedback about the care provided. There is regular communication between the manager and RI. A relative told us “*nothing is too much trouble for them*”.

A dedicated care team who are recruited, trained, and supported in their roles support people. Records show that staff are safely recruited and vetted by the Disclosure and Barring Service (DBS) every three years. Staff receive regular supervision meetings and feel supported. We saw evidence that staff receive regular supervision to support their professional development and discuss any changes to the service. Care staff confirm the management team are in regular contact and provide a good level of support. One staff member commented “*I do enjoy it here*”. On the day of inspection staff appeared to work well as a team and were supportive to one another. Records show staff are up to date with training requirements, which ensure they have the skills needed to offer good quality care and support. Care workers we spoke with feel they receive appropriate training to meet the needs of people they support.

There are a range of policies and procedures in place to support the smooth running of the service. A range of key policies are reviewed regularly to ensure they reflect current legislation. The service has developed clear roles and responsibilities for care staff. This enables staff to work flexibly and ensures they are familiar and confident to carry out a range of duties. We found evidence of staff meetings which give staff the opportunity to keep up to date with developments in the service.

The manager appropriately notifies relevant regulatory bodies and statutory agencies, when there are concerns and significant events, which might affect the well-being of individual's receiving care. We found the communication is effective, open and transparent. We found notifications to Care Inspectorate Wales, the Local Authority and health professionals are timely and consistent. A visiting health professional confirmed to us that referrals are appropriate, timely and advice is followed. They said the person they support is “*thriving*” at Danygraig.

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
12	The provider must ensure all policies and procedures are in place, reviewed and relevant.	Achieved

Date Published 22/02/2023