



# Inspection Report on

**Gwern Alyn Care Home**

**48 Percy Road  
Wrexham  
LL13 7EF**

**Date Inspection Completed**

**14 December 2021**

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## About Gwern Alyn Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pendine Park Care Organisation Ltd
Registered places	29
Language of the service	English
Previous Care Inspectorate Wales inspection	24 January 2018
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People receive good care and support from a caring staff group. They generally receive timely care, in line with their personal care plans, to ensure they remain as healthy as possible. People are supported to express their opinions on matters that affect their daily lives.

People are supported in a well maintained environment, which has good health and safety measures in place. Good attention is given to ensuring the environment is clean, with good infection control measures in place.

There is very good oversight of how the service operates. There is a strong management structure that ensures all aspects of the service is safely provided. Staff receive a good range of training and supervision to ensure they are competent and skilled.

## Well-being

People are supported to have control over day to day life. Personal support plans detail their individual needs and preferences. People told us they can choose when they would like to get up and where they spend their time. People can also attend resident meetings so they can express their opinions on a range of topics including food, décor and activities.

People's physical and mental health are promoted. Referrals are made to a range of healthcare professionals to support people in a timely way. People's risk of harm or abuse is well managed. Staff understand their responsibilities to report any concerns about people's wellbeing and safety. Everyone has a personal emergency evacuation plan (PEEP). There are good systems in place to manage infection control to keep people and staff safe. These include good use of personal protective equipment (PPE) by staff and thorough Covid 19 testing for staff and visitors.

People are supported to maintain good relationships with others. During the Covid 19 pandemic people have been supported via a range of means to keep in contact with those who are important to them. When possible people are able to receive visitors. People receive support and encouragement to make friends and/or maintain existing relationships within the home.

## Care and Support

People receive care and support that meets their individual needs. Overall personal care plans are thorough and demonstrate people's individual preferences are understood. It is clear that care staff know and respect people's personal wishes. Care and support plans are reviewed every month to ensure they are up to date. Daily notes and charts show that generally people receive the care they need, when it is required. Care staff received training on mouthcare in December 2021 to ensure best practice in meeting people's needs in this area.

People receive good support from friendly, respectful and motivated staff. People have choice about how they spend the day and their individual wishes are respected. Staff are kind and respectful and can generally provide care in a relaxed manner. People receiving support told us staff were "great". We saw there are warm, and at times appropriately humorous, interactions between residents and from staff. People are supported to enjoy activities, although the level of activity could improve. The service are trying to recruit a member of staff that could help to enhance this. The Covid 19 pandemic has adversely affected the provision of some activities due to restrictions on people visiting the home. The service look forward to re-introducing these art based activities when the situation improves.

People have access to a range of healthcare support, including GPs, district nurses and community psychiatric nurses. We spoke with a visiting professional who said support for health issues is sought in a timely way, and guidance provided is followed. People receive the medication they require safely. Staff competency is checked before they can administer medication. Robust audits of medication procedures are carried out on a regular basis.

People's safety is well maintained. The service has good systems in place to ensure people are safeguarded from abuse, including training, although we saw some staff need refresher training. Staff told us they would report any concerns to the management team. Infection control systems are good, and there is a wide range of measures in use to ensure people are safe from Covid 19. This includes testing visitors to the home, as well as good use of personal protective equipment (PPE) by staff and visitors.

## Environment

The service provides people with care and support in a well maintained environment. It is accessible and safe with good security measures in place. People are able to choose where to spend their time, be it in their own personalised rooms or various communal areas throughout the home. Some bathrooms have recently been refurbished to a good standard and feedback from staff is being used to further improve the suitability for people.

Health and safety of the home is well managed. The organisation have a maintenance team to carry out routine work in the home and gardens. Regular, detailed health and safety audits are carried out, including infection control, and identified issues are quickly dealt with. These audits ensure that health and safety checks are carried out as required, for example fire alarm testing and testing of water for Legionella.

## Leadership and Management

The service has good systems in place to monitor the operation of the home. The RI completes three monthly visits to have oversight of the service and writes a report with their findings. These demonstrate they have spoken with people and staff to ascertain their views. A range of audits are carried out to ensure all aspects of the service are monitored and reviewed, for example health and safety and care files. Quality of care reports are produced to look at how the service is achieving people's outcomes and to drive improvement of the service.

Overall, well-trained care staff support people living in the home. The service is working toward all staff receiving the correct training; this has been adversely effected by Covid 19 and staff absences. Staff feel they have good training for their roles. They receive supervision, and told us they feel well supported by the management team. Staff meetings are held to share information and to drive improvements in the service. Safe recruitment practices are followed when new people are employed; this helps to ensure people are protected. Whilst there are recognised difficulties in recruitment in the care sector, the organisation are taking positive steps to address it. The service plans to have sufficient staff on duty, although due to unplanned absences this is not always achieved. There are contingency plans in place to manage this and ensure people remain safe.





### 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
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
N/A	No non-compliance of this type was identified at this	N/A

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