



Inspection Report on

Glynderwen House

**Aston Care Ltd
Glynderwen House
13 St. Johns Road
Swansea
SA6 5EY**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

24th August 2022

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About Glynderwen House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Aston Care Ltd
Registered places	11
Language of the service	Both
Previous Care Inspectorate Wales inspection	14 th May 2021
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Glynderwen House is a well-managed service where people are happy, relaxed and enjoy living. There are good governance arrangements to ensure a quality service is delivered and maintained. The service is well-led by an experienced management team that communicate well, place people at the heart of the service and continues to develop around the needs of people they support. The Responsible Individual (RI) is actively involved in the running of the service and visits regularly. Staff recruitment and good access to training ensure staff are of suitable character and sufficiently skilled to undertake their roles. Care workers are well supported by their manager and receive regular supervision and appraisals.

Staff have developed trusting professional relationships with people, supporting them with dignity, kindness, and respect. Personal plans are outcome focussed and provide clear information on how best to support individuals. The service has a positive impact on the health and wellbeing of people, promotes active lives, independence and choice. Medication is well managed and consistently good protocols are in place to ensure this continues. People benefit from living in an environment which continues to adapt and improve around their needs.

Well-being

People live in a service which promotes positive outcomes and skills development. We saw positive and supportive interactions between care workers and people throughout the inspection. People told us they are happy living in the service and a professional stated; *“the service does well; giving people choice, person centred care and communication is excellent”*. People are supported to maintain and develop skills. We saw people being prompted and supported to complete a wide range of tasks and household activities. We also saw a person being supported to access the local community and participate in an organised local activity. Care workers and managers receive a wide range of appropriate training to ensure they are fully able to meet people’s needs and outcomes.

The service has a positive impact on the physical and emotional well-being of people. Personal plans and risk assessments are accurate and up to date. Care workers know people very well, supported by accurate information. Personal support plan reviews are completed and plan’s updated, as necessary. The provider is exploring ways of better capturing the input of people, representatives and positive outcomes achieved. Timely referrals are made to external professionals when needed. Safe medication management procedures support people to maintain their health. Daily routines focus on health, wellbeing and independence. These include participating in a range of activities, social interaction, healthy eating and community interaction. The service promotes contact with friends and family and promotes the Welsh active offer in service delivery.

There are effective measures in place ensuring people are safe and protected from harm and abuse. The building has good security and only authorised people can enter. There are effective infection control measures following current national guidelines. Visitors are welcomed but must display a negative test result for Covid-19. There are regular health and safety checks completed by managers. Key policies and procedures including Safeguarding, and Whistleblowing keep people safe. Staff are trained and fully aware of their safeguarding responsibilities. Risks and hazards are assessed, recorded and appropriate safeguards are in place. Staff employment and recruitment checks ensure staff are safe to work with vulnerable people. There are effective and robust governance arrangements in place to monitor and enhance the quality of service provided.

People are happy and comfortable living in a well-maintained environment which promotes their well-being. There is a real sense of community promoted by a well-managed team of care workers. There is an ongoing programme of refurbishment and redecoration to maintain the building. The provider has completed updates to areas such as the kitchen and a bathroom. There are plans to further enhance and update areas such as the communal lounge.

Care and Support

People live in a home that provides appropriate numbers of knowledgeable, competent and experienced care workers. We saw relaxed, flexible and personalised care arrangements. We also saw people being supported to attend community activities outside the home. A person informed us, *"I am happy here with no complaints or worries"*. There are clear and accessible daily activity planners visible to both people and care workers. All care workers confirmed that staffing levels are good, and the deputy manager told us the service is very settled at the current time. The deputy and manager have an active presence and will cover when needed. We observed people being supported to take part in a range of skills based activities during the inspection. The service operates a key worker system which means there is a named care staff member for each individual. We spoke to two relatives, one of whom told us; *"They do a great job. The care is very thorough and they genuinely care"*. Another told us; *"it is fantastic ...It's like a proper family there and they are really accommodating and helpful"*. We saw positive interactions between people and care workers throughout the inspection.

The service benefits from a staff member dedicated to activities, this is in addition to daily activities carried out by care workers. Daily activities and schedules are based on what people enjoy and would like to do. There are regular planned meetings arranged for the people living in the service and documented actions taken accordingly. There is a room dedicated to craft activities, an area with sensory equipment and a summer house in the rear garden which has now become an activity centre. We saw craft work and pictures people had produced. We saw people sitting together enjoying each other's company, relaxing and actively participating in household activities. We were told there is in-house transport available when necessary and all people have bus passes in place.

The care and support people need is clear within personal plans and risk assessment documentation. Personal care planning documentation is stored on an electronic system. There are also paper files containing historic information. Personal and risk plans viewed were seen to be current, detailed and regularly reviewed. Documentation viewed evidences progress in relation to people's outcomes and goals. The deputy manager told us they will explore ways of further strengthening the existing keyworker duties to ensure reviews fully capture the contribution of individuals and, or representatives. We were told several of the care staff speak Welsh. We were given examples of how this is actively promoted and used in the service.

Medication storage and administration processes in the service are appropriate and safe. Medication administration records (MAR) are accurate, appropriately signed with no errors identified in the records inspected. Since the last inspection regular medication administration audits have been introduced. Managers complete monthly checks and record outcomes with clear associated actions seen in documentation.

Environment

People live in an environment well suited to their circumstances and where they are happy, safe and relaxed. There is a real sense of community with many people having lived at the service for a long period of time. People told us the service feels very much like a family environment. There is a core staff team having worked at the service for many years. The home is generally well-maintained throughout with good personal and communal space for people to use. We saw improvements have been made since the last inspection including, a new kitchen, refurbished bathroom and new fire alarm system. The RI told us there are further plans to update a lounge with new flooring and complete redecoration in some areas. People's bedroom areas vary in size and shape adding to the homely feel of the building, they also reflect peoples' tastes. We saw self-contained areas of the home that promote individual's independent living skills and development well. Communal areas offer both interactive and quiet space for people to enjoy. There is a separate dining area, large lounge, crafts room and attached sensory area. Observations throughout the inspection confirmed people are happy living at the service.

People have good, secure outdoor space to use at the rear of the property. There is seating and tables for people to use. There is also a self-contained dedicated activity building. Visiting arrangements are well managed and visitors made to feel welcome. Any visitors before entering must go through a set protocol in relation to infection control that is aligned with current guidelines.

A maintenance and refurbishment programme is in place. We were told by staff and the deputy manager, any reported maintenance issues are addressed promptly. We saw regular service checks are carried out by external professionals and oversight is maintained by managers. This includes gas, electricity, water and electrical portable equipment checks (PAT). Safety certificates were checked and found to be in date. Fire safety procedures are in place and managers are responsible for maintaining checks. The current fire alarm has been renewed and updated. All people have a current personal emergency evacuation plan (PEEP) in place. Whilst nearly all areas are safe and secure we noted a boiler room door had no lock fitted, the provider took immediate action to address this issue. All COSHH (Control of Substances Hazardous to Health) materials we saw were stored correctly and safely.

Leadership and Management

There is a strong, supportive, long standing management team with good governance arrangements in place to ensure a high-quality service is delivered. The deputy manager told us the RI is accessible and very supportive, visiting the service regularly. We saw very detailed quality of care review documents which include feedback from people, care staff and managers. The reviews also include future plans and clear actions linked to findings. We spoke to four care workers and received two staff feedback questionnaires. Feedback received was overwhelmingly positive. One care worker told us; *“this is by far the best place I have worked, it’s like a family here”*. Another care worker told us; *“supported really well – communication is really good, managers are really supportive and understanding”*.

The service provider ensures there are good staffing levels, and all staff are well trained and supported. We found consistently good staffing ratios at the service. This ensures people are safe and have the care and support they need. Staff experience a detailed initial induction and an ongoing programme of training and development. A new care worker confirmed they are receiving a thorough induction linked to the Social Care Wales Induction Framework. Staff are encouraged to further their knowledge and experience to develop their career. This was evidenced by clear career progression seen in the service. Staff are being well supported through formal and informal supervision processes.

The statement of purpose (SoP) accurately reflects the service provided. We looked through several policies and procedures which are being reviewed on a regular basis. These include administering medication, physical intervention, we noted some minor changes are needed which were discussed with the RI. We viewed employee recruitment records and saw good processes are being maintained. This includes disclosure and barring checks (DBS), employment references and proof of identity checks. We also saw an overview document of staff supervision and appraisals detailing these are in date and planned.

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

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