



Inspection Report on

Comfort Care Homes (Glan Yr Afon) Ltd

**Glan-yr-afon Care Home
Glan-yr-afon Lane Fleur De Lis
Blackwood
NP12 3WA**

Date Inspection Completed

22 March 2022

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About Comfort Care Homes (Glan Yr Afon) Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Comfort Care Homes (Glan Yr Afon) Ltd
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This is a service which is continuing to develop its ability to fully offer the 'active offer' of the Welsh language.

Summary

This inspection was unannounced Swarnlata Bansal is the responsible Individual (RI) for the service and the manager is registered with Social Care Wales, the workforce regulator in accordance with legal requirement.

There are sufficient care staff available to provide prompt assistance, and arrangements are in place to cover any future shortfalls. Care staff receive training to ensure they are able to meet people's needs effectively and people receive support from staff who show respect and kindness. People sometimes receive a range of social and recreational support in accordance with their interests, however this has been restricted during the Covid-19 pandemic.

The RI visits the home weekly and takes action to address areas where improvements are required. The management team is visible and engaged in the day-to-day running of the service, and systems are in place to ensure the quality of the care and support provided. Care documentation overall reflects the care and health needs of people living at the home.

The home is clean and infection control measures are mostly in place but improvement is required. The environment is fit for purpose with ongoing refurbishments in place.

Well-being

People receive support that promotes their physical health and mental health. They appear clean and well-groomed, and care staff respond promptly to their needs. People can move freely in accordance with their ability and level of risk although at this time there are refurbishment works which is restricting various areas of the home. People benefit from a variety of social activities and pastimes of their choice.

People have a voice and can make choices about their day-to-day care. Care staff value and respect the preferences of each individual and encourage independence wherever possible. They keep personal plans up to date and record people's views and feedback about their care. This serves to ensure care is person-centred and continues to meet people's needs and expectations.

People have a good choice of meals and drinks to suit their nutritional needs and preferences. We saw people enjoying the meals provided and observed a calm, social time for people to enjoy. The chef told us of each person's dietary requirements' and had a good understanding of people's likes and dislikes.

People are protected from harm. The entrance to the home is secure and the environment is mostly clean and hazard free. Care staff are up to date with safeguarding of adults at risk training and all mandatory courses relating to environmental cleanliness and safety. Arrangements for fire safety and general maintenance are in place. Care staff are mostly using appropriate personal protective equipment (PPE) to reduce the risk of infection and we saw sanitising areas throughout the home but identified where improvements are required.

People's individual needs define their personal plan, and care and support is adapted to suit their situation. Risk assessments identify people's particular vulnerabilities and strategies for protecting them. They are reviewed regularly and as required, for example to reflect a change in support needs. There is documented evidence in care files of support from other professionals such as GP and dietician.

Care and Support

People receive appropriate person centred care. Care and support records show that referrals are appropriately made in a timely manner to the relevant health and care professionals when required. Risk assessments are carried out routinely or as required following an incident, they identify vulnerabilities for the individual and set out ways to keep people safe.

Care staff maintain accurate and up-to-date care recordings, which reflect people's current needs. There was sufficient information to inform staff how to support and care for people with complex health and behavioural needs effectively and safely. They give a clear picture of the individuals' needs, likes and what matters to them. During our visit we spoke with individuals who told us care staff are kind and helpful. We saw care workers available throughout the home and readily available to provide assistance. Nurses share information formally during handover highlighting any significant changes in people's condition or prescribed treatments. All care staff receive updates about people they support at the start of each shift. Care plans are person centred and care workers review and revise them regularly.

Medication management policies and staff training are in place to ensure safe practice. The medication administration records (MARs) are regularly audited and any shortfalls noted, so the service can take appropriate action, for example retraining or updating care staff.

People have timely support with their medical needs and access to a range of healthcare professionals. We saw evidence of consultations with the GP, dietician and optician. Wherever possible the professionals involved record in the person's file any changes in treatment or in the care they wish staff to deliver; staff in turn update the relevant care plans.

People benefit from the support of friendly and respectful staff. During our visit, we heard staff speaking kindly and in a good-humoured way. Care staff know the people they support well; therefore, they can recognise any deterioration in health and well-being, and act accordingly. At this time visiting remains restricted and a booking appointment system is in place. This is due to the COVID-19 pandemic, but under normal circumstances, people are able to receive visits from friends and family at any time. Throughout the pandemic, management and care staff have supported individuals to stay in contact with their loved ones via phone calls.

People are able to participate in a range of social activities within the home. There are a variety of activities available including music sessions, memorabilia, arts and crafts and time spent in the garden during the warmer weather.

Environment

People benefit from a safe and secure environment. The environment is clean and as hazard free as possible. Window restrictors are in place and all hazardous cleaning chemicals are appropriately locked. Regular fire safety checks are carried out and people have personal emergency evacuation plans in place (PEEPs). These records provide up-to-date information for staff about the support each person would need in the event of a fire. There is a fire safety risk assessment and care staff receive training in fire safety and first aid. The home completes environmental audits to ensure areas are clean and safe.

Since the previous inspection the service has had refurbishment works carried out which includes paintwork. At the time of the visit the entire ground floor was being prepared for new flooring throughout. Due to the COVID-19 pandemic completion of any works are planned to commence at a future date. We identified one area which required attention in the boiler room and highlighted our concerns to the manager. We have been told that this area would be addressed immediately.

People are protected from environmental health and safety risks. The entrance to the home is secure and care staff check visitors on arrival. At present, all visitors need to evidence a recent negative COVID-19 test, or be prepared to self-test on arrival in accordance with guidance. There are handwashing facilities throughout the home and PPE is readily available for staff and visitors. However we identified that PPE was not always stored correctly and found aprons stored on the handrails throughout the home. We requested these be removed immediately to prevent cross infection.

The layout of the home promotes accessibility and independence where possible. Lounges and the dining room are easily accessible for people with reduced mobility. The home has received a food hygiene rating of 5 (indicative of 'very good' hygiene practices). Bedrooms are spacious and contained personalised items of people's choice. Management oversee the home's health and safety requirements. Appropriate certification is in place regarding facilities and equipment, such as gas, electrical appliances, nurse call alarms, manual handling equipment and the passenger lift. From our walk-around, we noted that window openings that may pose a risk to residents are secure.

All confidential files including care files are stored in lockable areas.

Leadership and Management

People can be assured that the service is run in accordance with up to date policies and procedures. We found that the majority of policies had been reviewed and contained updated information in light of changes to guidance. Therefore, any staff provided with this information would be following information which is current and up to date to underpin their practice when supporting people. Future dates for staff, management, relatives and resident meetings have been arranged with feedback and engagement sought. This area has been delayed due to the COVID-19 pandemic.

People can be confident the provider monitors the quality of the service they receive. Systems and process help promote the smooth running of the home. Management oversee incidents, accidents and complaints. The home carries out internal audits to monitor standards and practice. Daily nurse handovers ensure pertinent information is shared between staff at shift handover. We looked at some key policies and saw a Covid-19 contingency plan is in place. The statement of purpose describes the home and its facilities. A written guide gives people key information about the service.

People can be assured that staff are competent to undertake their roles. We looked at four staff recruitment files and noted they contained all the pre-employment checks required in respect of any person working in regulated services. We identified that where training was overdue, training days have been booked and dates provided. This area has also been delayed due to the COVID-19 pandemic. Training records show that training has been carried out and the general workforce have the skill and knowledge for the role they undertake. Care staff are provided with specialist training in areas including dementia care, and end of life care, diabetes care and catheter care. We discussed training with the manager who told us that some training had been difficult to undertake during the Covid-19 pandemic but that all staff were mostly up to date and future refresher training booked.

There is evidence of suitable service oversight and governance. The RI regularly visits the home and engages with individuals and residents. They demonstrate quarterly oversight of resources and we saw a quality of care review which has been completed since the last inspection.

We found there is appropriate oversight of the service in place.