



Inspection Report on

Gwern Alyn Care Home

**48 Percy Road
Wrexham
LL13 7EF**

Date Inspection Completed

20/05/2024

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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	14 December 2021
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

People live in a warm and well maintained home and are supported by good numbers of kind, caring and attentive care staff. People told us they are well looked after and like living there. Care staff follow detailed plans for people's care and support, which highlight people's individual strengths and abilities as well as where they need support. People are encouraged to make decisions about their care and support and their opinions on how the service is run are valued by the service provider.

The service provider has good governance processes in place, and the Responsible Individual (RI) monitors the day to day management of the home on their behalf. The RI works closely with the manager and meets with them monthly to review the outcomes of routine audits of care and support in the home. The provider ensures all staff follow policies and procedures for management of health and safety and infection in the home. There are safe recruitment procedures in place for new staff. All staff receive good training and are well supported by the manager and service provider. This is supported by feedback from care staff, many of whom have worked for the provider for many years.

Well-being

People have control over their day to day lives. People are involved in planning how their care and support is delivered. Care staff respect people's preferences for care and support and offer choice in all aspects of their daily lives. People can move about the home as they please and their rooms are highly personalised. While engagement with activities is encouraged, people can choose not to participate if they wish. There is a choice of menu options for each meal and the catering department meet with people to discuss menus and what changes people might like to see. The provider gathers feedback from people on their experiences of living in the home and value their opinions about what developments may be required.

People are supported to maintain their physical and emotional well-being and do things which make them happy. We saw visiting healthcare professionals in the home during our inspection and records show people have timely access to external professional advice and support when required. There is a programme of events, activities, and celebrations for people to join in with if they wish. We saw lots of people engaged in an art session using watercolour paints, and artwork they had previously made was displayed in their rooms. People told us they enjoy singing with visiting choirs and entertainers. People experience enhanced well-being because their Welsh language needs are understood and catered for. We heard people speaking and singing in Welsh during our visit, and Welsh language TV and radio is used by some people. Care staff have a Welsh language communication toolkit with key phrases to aid conversations about how people are feeling and basic conversational vocabulary for those people who prefer to use Welsh.

People are protected from abuse and neglect. All staff receive regular training in how to recognise signs of potential abuse and neglect and how to report this. There are policies and procedures in place to guide care staff in the safe delivery of care and support. People are supported to access advocacy services where required and the manager ensures the correct legal processes are followed to help people who lack capacity to make decisions about their care and support to get the support they need.

People live in a home which meets their needs and supports them to achieve their desired outcomes. The provider ensures people have access to the equipment and facilities they need. There are individualised risk assessments in place for people to help them remain as independent as possible and meet their care needs. People have access to a variety of spaces in and around the home.

Care and Support

People receive care and support which meets their individual needs and their opinions and preferences are incorporated throughout the care planning process. The manager ensures people undergo a thorough pre-admission assessment before confirming the home can meet their needs. They analyse information gathered from a variety of sources to help make this decision, including from people themselves and their families or representatives. Personalised plans for people's care and support are written prior to their arrival. These are strengths based and provide good, clear guidance for care staff about people's preferences for care and support, including their language preference, what they like to do or eat and drink, and who is important in their lives. Plans are accessible to care staff and reviewed regularly with people. Care staff reviewing the plans discuss them with people and write a summary of what is going well for each person and if there is anything they want more or less of. Any changes in care and support needs are updated in people's plans as they occur. Daily records are kept of the care and support provided to people, and the manager is working with care staff to ensure these are consistently detailed and evidence all support provided.

People are supported by good numbers of caring, kind, and respectful care staff, who know people well and have good relationships with them. One person told us "*I am very well looked after*" and another said, "*the staff are lovely and look after us so well*". We saw warm and friendly interactions between care staff and residents with lots of smiling, compliments and chatting back and forth. Records show care staff follow people's planned care. During our inspection we saw people are well-groomed and care staff are attentive and proactive in their care for people and respond in a timely way to requests for support. We saw care staff are gentle and well-paced when helping people to eat and drink and mobilise; they supported people in a way that matched their abilities, understanding, and communication needs. We saw care staff routinely offering gentle physical contact in the form of holding a hand or giving a hug.

There are policies and procedures in place to manage the risk of infection in the home, and these are followed by staff and visitors. There are staff in the home daily to clean and a detailed checklist for them to follow to ensure all areas are thoroughly cleaned. We saw care staff using appropriate PPE (Personal Protective Equipment). Records show there are appropriate medicines management and administration practices in the home.

Environment

People live in a home which is warm, secure, and welcoming. The provider ensures the home is beautifully decorated throughout. We saw allocated staff working on routine maintenance and repairs in the home and grounds during our visit. People's bedrooms contain the furniture and equipment they need, as well as personal pictures and ornaments which are important to them. People told us they like their rooms; we saw they are tastefully decorated with coordinating soft furnishings and are cozy and private spaces for people. There are multiple communal lounges of varying sizes, with ample comfortable seating for people to use. We saw people like to socialise, watch TV, or join in with planned activities in these lounges. Dining tables and chairs in the main lounge-dining room ensure people can have a sociable mealtime experience if they prefer. We saw appropriate equipment and facilities available throughout the home to meet people's needs and help them achieve their desired well-being outcomes.

The RI ensures robust health and safety monitoring, and risk management processes are followed to keep people safe. Routine health and safety checks are completed in line with latest legislation. Audits of health and safety are conducted regularly, and issues identified are addressed in a timely way. Detailed records are kept of all servicing, maintenance and certification of equipment used in the home. The home has a level five food safety rating, which is the highest level achievable. All staff complete regular training in health and safety matters, including fire safety and use of firefighting equipment. The home's firefighting equipment is regularly serviced and there are individual Personal Emergency Evacuation Plans in place for each person to guide emergency services personnel in the event of an evacuation. Appropriate health and safety risk assessments in place for both individuals and covering the whole home are reviewed regularly and updated promptly when changes in risks occur.

Leadership and Management

The service provider has robust governance arrangements and quality assurance processes which ensure people are receiving good quality care in the home. There is a layered management structure in place to support the home manager. The provider has a comprehensive set of policies, procedures, and toolkits which are accessible to care staff and guide them in how to support people effectively and safely. The manager ensures audits of all aspects of care are supported and any actions identified are allocated to specific staff or teams and given completion timelines. The manager reports outcomes of internal and external audits, and progress with completing any actions to the RI and senior managers each month. The manager acts promptly to address recommendations from audits of all aspects of care and support by external professionals. The RI visits the home regularly as part of their monitoring of the day-to-day management of the service. They gather feedback directly from all staff and people living in their home on their experiences and review a selection of records at each visit. The RI analyses their findings and reports them to the provider as part of the quality of care review systems in the home.

People can be confident the provider has safe staff recruitment and vetting processes in place. New staff undergo thorough recruitment process, including Disclosure Barring Service (DBS) checks, before starting work in the home. There is a robust induction process for all new staff and this is further supported by a comprehensive ongoing training programme to ensure they remain knowledgeable, skilled, and competent in their allocated roles. The provider ensures any training provided meets the needs of people living in the home. Training is completed face to face and online and is provided by both in-house trained trainers and external providers, including visiting healthcare professionals. The manager monitors all staff's compliance with training and detailed records are kept. Records show all staff receive regular one to one supervision with management and annual appraisals. Records show a good proportion of the care staff have worked for the home for many years and feel well supported by the manager and the provider.

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
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