



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru  
Care and Social Services Inspectorate Wales

## Care and Social Services Inspectorate Wales

Care Standards Act 2000

# Inspection Report

Gelynnen Care Home

Pencader

Type of inspection – Baseline

Date of inspection – Tuesday, 13 October 2015

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## Summary

### About the service

Gelynnen Care Home is registered with Care and Social Services Inspectorate Wales (CSSIW) to provide personal care and accommodation for up to four people between the ages of eighteen and sixty four years, who have a learning disability. On the day of the inspection there were three people living in the home.

The home is situated in the semi-rural village of Pencader and comprises of two modern linked semi-detached houses. The accommodation is over two floors. There are four single bedrooms, two have en suite facilities. There are good communal facilities, an enclosed rear garden, paved areas, and parking for vehicles to the front and sides of the premises.

The registered provider for the home is Inspiration Lifestyle Services Ltd, who have two other homes, in Llandysul and Kidwelly. There is a service manager with day to day responsibility for the home. They are currently going through the CSSIW registration process.

### What type of inspection was carried out?

This was a scheduled unannounced baseline inspection to determine if the service is acceptable and whether the conditions of registration are appropriate. We (CSSIW) contacted the home at 9.35am on the morning of the inspection to confirm that there would be staff/people living in the home, to enable the inspection to proceed. We arrived at the home at 10.45am. The information for the report was obtained through:

- Examination of Information relating to the home held by CSSIW
- One inspection visit
- Observation of and discussion with people living in the home and staff present during the inspection
- A tour of the premises to determine the quality of the environment
- Examination of the records of one person living in the home
- Examination of the recruitment file of one member of staff
- Examination of documentation relevant to the inspection.

### What does the service do well?

The registered providers are committed to improving the service for people using the service and staff, as they are actively involved in the Investors in People Accreditation Scheme, which supports organisations to achieve effective management by putting people first. The organisation achieved the Gold Award in May 2015.

### What has improved since the last inspection?

The registered persons were notified during the previous inspection that they were not fully compliant with one of the regulations. Good practice recommendations were also identified. We saw evidence that these issues had been addressed. The actions taken to

address the issues are discussed in more detail in the body of the report.

**What needs to be done to improve the service?**

We notified the acting manager that the service was not fully compliant with two of the regulations within The Care Homes (Wales) Regulations 2002:

**Regulation 17(2) – The registered person shall maintain in the care home the records specified in Schedule 4 (6).** This is described in more detail in the report in the Quality of Staffing theme.

**Regulation 23B – Local Resolution.** Complaints that are dealt with locally must be resolved by the registered person as soon as reasonably practicable and in any event within 14 days. This is described in more detail in the report in the Quality of Leadership and Management theme.

We spoke with the acting manager by telephone on 15 October 2015. We were informed that the company had already commenced the audit of staff files, and the complaints policy and supporting documentation had been amended in line with Regulation 23B.

We did not issue non-compliance notices. Both issues identified during this inspection may be examined in more detail in the next inspection.

## Quality Of Life

Overall, we saw evidence during the inspection that people are supported by staff to be as independent as possible within their capabilities. We observed that people have choice, are valued and treated with respect, and lead an active and purposeful life.

People living in the home, their relatives/representatives can be confident that the service is able to meet their needs as each person living at in the home had benefited from a period of transition, which enabled the pre-admission assessment, supported by the placing authorities needs assessment, which determined if the service could adequately meet their needs.

People can be confident that they have choice and influence over their daily lives. We found that people were able to exercise their rights and were observed to be treated by staff with compassion, respect and dignity. We met with two of the three people living in the home, who were in the home when we arrived. We were informed that the third person was at a local college, which they attend three days a week, to develop their independent living skills. We were informed that they had also been supported by staff in the home and the college to achieve the Duke of Edinburgh Bronze Award. We spent some time in the kitchen diner speaking with the two people living in the home who were having breakfast together, before getting on with their plans for the day, which were quite exhaustive.

We spent most of the inspection sitting in one of the lounges where we were able to observe staff and people living in the home going about their daily routines. Staff were observed to encourage and support people to make choices. We were informed by one person that they were going to a local holiday camp later that day for two spa days, supported by staff. We were invited by them to look at their bedroom which they were very proud of. It was decorated to reflect their personality. We were shown the en suite facilities, which were spacious and contained a wet room. When prompted they spoke enthusiastically about their life in the home and community. They said that they were looking forward to a fourth person coming to live in the home but 'hoped it wouldn't be a female'. There was much warmth between the person and the member of staff supporting them during the inspection. They said that they were looking forward to their spa treatments, which they would both be experiencing, and then having a meal in the restaurant this evening. "I really enjoy going on the golf buggy around the resort". The other person living in the home had a very busy day planned. They were going to the dentist for a check-up, then to do the weekly 'shop for food' with the member of staff supporting them. On their return from shopping they were going to the last carriage driving (horse) meeting for this season, and then to the Gateway Club this evening.

People can be assured that they receive person centred care as staff spoken with know the people they support well, and were knowledgeable about the wishes and needs of each person. This was evidenced in the records we examined of one of the people we spoke with and observed. There were detailed person centred care plans and risk assessments, which were reviewed monthly or as need changed. We saw that the care plans and risk assessments had recently been reviewed. Through discussion with the acting manager it was identified that they had difficulty in arranging the annual review of

the person by the placing authority, which was not in Wales. There was evidence in the person's records of a recent letter sent to the placing authority. There had been no response to date. We discussed contacting the relevant Primary Care Trust to seek their advice.

People are supported to be fit and well through regular contact with health professionals involved in their care. We saw evidence that people are encouraged to eat a healthy, varied diet. The noticeboards in the kitchens displayed pictures of the meals planned for that day, for each person. People were able to choose an alternative to the main meal.

## Quality Of Staffing

Overall, people living at the home can feel confident in the care that they receive as discussion with staff present during the inspection identified that there is a stable staff team who are confident and enthusiastic in their roles.

There were sufficient staff in the home during the inspection to meet the needs of the people living in the home. Staff were seen to be relaxed and not rushed. The previous inspection identified that staff did not always enter information relating to individuals living in the home in the correct file. The acting manager said that they had addressed the issue through discussion with staff. The records we examined only contained information relating to the person.

Staff spoken with were observed to be relaxed in our presence and informative about their roles and responsibilities. Staff said that they were well supported by the staff team and management. We spoke with one member of staff who informed us that they had not previously worked in a care environment. We said that it must have been a huge learning curve for them. They responded with “that’s exactly what I would say. It has been a huge learning curve. I’ve had many challenges but really enjoy what I’m doing”.

People can be assured that their wellbeing is promoted and protected as the registered persons ensure that all staff receive mandatory training (essential training such as health and safety, fire safety, food hygiene etc.) and updating to enable them to provide safe and effective care. Discussion with staff present during the inspection confirmed that they receive specialist training to enable them to support people with autism and complex needs, such as management of epilepsy/seizures, positive behavioural management, intensive communication training. We did not examine the training matrix/plan during this inspection.

People living in the home can be assured that the registered persons consider their safety and wellbeing as there is a recruitment process which aims to protect people living in the home. We examined the recruitment file of one member of staff we had spoken with during the inspection. The file contained all the documentation required by regulation, except for a copy of their birth certificate, which is required under Schedule 4 (6) of the Care Homes (Wales) Regulations 2002. The acting manager said that they would address this immediately with the person, and ask the company administrator to audit all staff files to ensure that they contain all of the documents required under Schedule 4 (6). This may be examined in more detail in the next inspection.

## Quality Of Leadership And Management

People living in the home, their relatives/representatives and staff can be confident about what the service sets out to provide as there was a statement of purpose and an information guide for people living in the home, which were current and are reviewed annually. There was a detailed Quality Assurance Report (Quality of Care Report), dated 2014 – 2015. The documents were available for people living in the home (some in picture format), their representatives and other interested parties to view.

There has been no registered manager in the home since November 2014. There is an acting manager who is in attendance in the home for a minimum of five days a week. They were present throughout the inspection. They informed us that they are in the process of being considered by CSSIW for the role of registered manager for the home. We were informed that they had recently completed the CSSIW pre-interview questionnaire and expected to receive a date for interview soon. We saw evidence that they had achieved the necessary qualification to enable them to manage a care home, and were registered with the Care Council for Wales.

People living in the home can be assured that the registered persons continue to develop good care practices, to enhance the lives of people they support. We saw evidence that people were supported to access independent advocates, through 'People First'. The information informing people of the advocacy service was displayed on the noticeboards in the entrance halls. We were informed that the advocacy service had attended meetings held for people living in the home, where they were able to explain their role in supporting people. Photographs of members of staff including the bank (temporary) staff employed by the company, and members of the company management team, are displayed on the wall near the office, on the first floor. This enables people living in the home, relatives/visitors to recognise and identify with the staff and company management team.

We saw evidence that Regulation 27 visits (undertaken by the registered provider or their representative/responsible individual, who must visit the home at least once every three months to undertake discussion with/observation of people living in the home, their representatives and staff, inspect the premises, and compile a report which must be available in the home for interested parties to view), were being undertaken every three months. The most recent visit being on 5 October 2015. Where issues were identified there was an action of how they were addressed.

We examined the complaints records, policy and procedure. There were two complaints currently under investigation. We saw evidence that CSSIW had been informed of both complaints. The complaints policy must be amended to meet with Regulation 23B Local Resolution, of The Care Homes (Wales) Regulations 2002, which states that; complaints that are dealt with locally must be resolved by the registered person as soon as reasonably practicable and in any event within 14 days. The company policy states 28 days. The acting manager said that they would ask the company administrator to amend the complaints policy, procedure and any related documentation immediately. This may be looked at during the next inspection.

CSSIW registration certificates: date of issue 12 January 2015 were current and displayed in both Welsh and English in one of the entrance halls.

## Quality Of The Environment

People can be assured that the registered persons make every effort to ensure that the premises are homely and pleasant for people living there and staff working there.

The home comprises of two modern linked semi-detached houses, which mirror each other. There are two first floor bedrooms in each house, one bedroom has en suite facilities and the other has the sole use of a bathroom. A communal kitchen/diner, lounge and cloakroom are on the ground floor. The managers' office is situated on the first floor in one of the houses, as is the medication storage cupboard and bedroom for staff who are designated as 'sleep in/wakeful staff. We were accompanied on a tour of the home by the acting registered manager. We found the areas we visited to be clean, well ordered, well-maintained and free from offensive odours. There are good outside spaces with a garden room, greenhouse and smoking shelter for people to use.

The communal kitchen/diners provide all the facilities required to enable staff to support people living in the home to prepare and share meals, if they so wish. We were informed that the home has not had a visit from the Environmental Health Agency to assess the standard of hygiene and food preparation. A letter on file identified that the agency had been contacted in 2011. The acting manager said that they would contact the agency to discuss if the home needed to be assessed and provided with a food hygiene rating.

The home does not have a utility/laundry room. There is a washing machine in both kitchens. We were informed that each person living in the home had a laundry basket in their room where dirty laundry is placed and then transported to the kitchen. Personal laundry is washed separately for each person. There were hand washing facilities in each kitchen, disposable towels, sanitising gels and soap dispensers, aprons and gloves for people and staff to use.

People can be confident that their wellbeing and safety is considered as there was evidence of regular maintenance and servicing of equipment such as the heating system, electrics, water testing, fire safety system, etc., as required by regulation. The public liability insurance certificate was due for renewal in November 2015.

## How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.