



Inspection Report on

The Glynne Home

**49 High Street
Caergwrle
Wrexham
LL12 9LH**

Date Inspection Completed

27/09/2024

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About The Glynne Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	S & S Care UK LTD
Registered places	21
Language of the service	English
Previous Care Inspectorate Wales inspection	07 October 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the support they receive at The Glynne, they are supported by kind and attentive staff who know them well. Care staff provide positive reassurance and interaction. People are supported to make choices about their daily lives and personal plans are person-centred, detailed, reflect people's needs, reviewed and changed accordingly. Activities are on offer on offer facilitated by an activity coordinator.

Staff say they feel well supported by Management. There are good governance arrangements in place with the Responsible Individual (RI) visiting the home regularly to oversee management of the home and gather the opinions of people and relatives to help to improve and develop the service. Quality of care review reports consider feedback from people and relatives and document actions that will be taken in response. The service is undergoing a considerable amount of environmental works at present, the service provider has good oversight of these. The service is operating in line with the statement of purpose.

Well-being

People have control over their day to day lives and feel listened to; they contribute to decisions that affect their life. Personal plans are written together with the person and cater for people's preferences. People say they like living at the home and can they make choices on how they live their lives day to day. People and their relatives are involved with the improvement and development of the service and have choices around food and activities on offer. Care staff listen to people's wishes and they told us *"They [care staff] really listen to us and are never too busy if we need something"*. People's bedrooms are personalised and are undergoing redecoration along with the rest of the service. Care records give care staff the instruction required to support people accurately and reviews are carried out in line with regulations. People are supported to move around the home safely and it is clear staff know residents well. People have visitors coming to the home regularly, relatives told us *"They facilitate the finest detail of communication and work hard to maintain relationships"*. People have good relationships with other people they live with and care staff. Activities are on offer in the home and there are noticeboards on display telling people what activities are happening and when. Religious representatives come to the home to ensure people can practice their faith.

People are protected from abuse and neglect, with care staff receiving training in safeguarding and policies and procedures in place and followed. People are supported to maintain and improve their health and wellbeing through access to specialist care and advice when they need it. Referrals are made in a timely manner to specialist services, ensuring people receive the right care and support, as early as possible. Care staff and the manager are proactive and work collaboratively with support agencies.

The lay out of the home mostly supports people to achieve a good standard of well-being. There are considerable works going on at the home, the home is managing these well whilst people continue to live in the home and there are clear timescales in place for completion of the works. People are encouraged to be independent and are supported to get to different areas of the home when needed. Strategies for reducing the risk to people while they move around the home are sufficient given the works being completed. The manager has identified potential hazards and has taken steps to minimise risks to people.

Care and Support

People feel confident the service provider has an accurate and up to date plan for how their care and support needs should be met. The service is in the process of developing their personal plans to evidence a more outcomes focussed and person-centred approach. New personal plans show people are encouraged to co-produce them and have choice over everyday decisions and outcomes they want to achieve, they clearly document people's preferences. Personal plans are up to date, accurate and regularly reviewed. Risk assessments are in place and regularly reviewed. Pre-assessments take place before people move to the service and tell staff about people's history and how they came to be at the home. People receive care in line with their personal plans and risk assessments and care staff are kept informed of important updates through daily handovers, *"Staff always ask whether they would prefer a bath or a shower"*. People told us *"The staff are caring and attentive, I don't need to ask twice for anything, they come straight away, we have fun together."* People have choice of what to eat and can have more if they wish. Food is well presented, and appetising. Dietary choices are well known by kitchen staff who work hard to make sure people with specialist dietary requirements also eat food that is appetising, people told us *"The food is lovely, the kitchen works so hard, they make sure we have fresh and healthy food."* Staff complete manual handling in accordance with manual handling recommendations.

People have access to specialist advice and support from health and social care professionals and care plans and risk assessments are updated to reflect professional advice. There are good processes and practices in place for staff to communicate and escalate changes in need in a timely way.

Medication administration management practices in the service are good and keep people safe. Trained senior members of staff administer medication and their competency to do so is regularly assessed. Regular medication audits are carried out by management to ensure good oversight.

Environment

People live in an environment suitable to their needs. The service provider continues to invest considerably in the decoration and maintenance of the service to ensure it meets people's needs and keeps them safe. During the inspection, the service was in the final stages of an electrical re-wire, communal areas and bedrooms were being redecorated and some walls had been plastered. Since our inspection walls have been wallpapered and there are plans for new flooring and carpets once the rest of works have been completed. Rooms which have been decorated are light, airy and personalised to people's taste with belongings. People can socialise in communal spaces and have privacy in their own rooms if they wish. Whilst works are ongoing, management and care staff are working hard to ensure there is minimal disruption to people living in the home, supporting them to move round the home safely. People told us they are looking forward to the works being completed but have been well looked after whilst they are happening. People access the home through a securely locked door and visitors must sign in and provide identification on arrival. The service provider has infection prevention and control policies with good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety; regular health and safety audits are completed with actions dealt with swiftly by maintenance staff. This is monitored by management and the RI. The home has a food hygiene rating of two, meaning improvement is necessary. The service has now completed most of the recommended actions and intends to request another visit from the Food Standards Agency to retest compliance. Routine health and safety checks for fire safety, water safety and equipment are completed, and records show required maintenance, safety and servicing checks for gas, and electrical systems are all up to date.

Leadership and Management

People can feel confident the service provider has systems for governance and oversight of the service in place. The RI visits the service regularly to inspect the property, check records and gather the views of people and staff. RI reports show all aspects of the day to day running of the service, they are comprehensive, analyse any issues found and clearly document actions to be taken as a result. There are regular management audits undertaken with action plans in place to address areas requiring attention. A quality of care survey is conducted every six months and meetings are held for residents to provide feedback to managers. The RI gathers feedback directly from people using the service and people say they can speak to the manager about changes to their care and action is taken. The provider has submitted an annual return as required by regulation. Newsletters are being created for residents and family and these will be used to inform people of events and planned developments in the service.

People can be satisfied they will be supported by a service which provides appropriate numbers of staff who are suitably fit. Care staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. The manager has suitable numbers of staff on each shift to support people's needs and new staff undergo thorough vetting checks prior to starting work in the service. People told us, *"There is a core established staff team, we know staff, they know us and there is a low turnover of staff."* Staff receive an induction specific to their role and management have made improvements to ensure staff receive the support that they need through annual appraisals and one to one supervision meetings. Staff are employed specifically for cleaning, activities, maintenance, and cooking. Care staff state they feel well supported by the manager and have access to the training required to meet people's needs. Training is provided to staff through a combination of online and face to face learning, training records are reviewed and updated to make sure they accurately reflect training compliance. Care staff have either registered with Social Care Wales, the workforce regulator, or are in the process of doing so.

People can be confident the service provider has an oversight of financial arrangements and investment in the service so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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