

Inspection Report on

Glencoe Villa

Penmaenmawr

Date Inspection Completed

12/02/2025



About Glencoe Villa

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Inspired Homes Network Ltd.
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	17 October 2023
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 Welsh language and culture.

Summary

People are comfortable and happy living in Glencoe Villa. They spend their days doing things they want to do, at home and in the community. People have choices about their daily routines, what they want to eat and what they want to do. They participate in household activities such as baking and meal preparation and contribute to keeping their space clean and tidy. Personal plans are comprehensive and focus on people's skills as well as where they need support. The environment is homely and comfortable; rooms are personalised, and a place people can keep and display things that are important to them. Each floor of the home is allocated to a person, to give a sense of living in their own apartment, some responsibility for their space and to promote their independence. Care staff are safely recruited and trained to ensure they have the skills needed to provide people with the right support. They know how best to support people to achieve their outcomes. The RI (responsible individual for the service) oversees the service as they visit the home regularly to check it is running smoothly and determine what is working well and where any improvements can be made.

Well-being

People have control over their day-to-day life because the service knows how they like to carry out their day. Personal plans detail people's preferences and aspirations. They can speak in Welsh if they prefer, as staff are Welsh speakers. People have weekly planners that show what they can look forward to such as shopping, baking or going to a disco. People carry out their lives how they wish to, planning events, visiting facilities in the local area and advancing their cooking and baking skills in the home.

People's physical and mental health and emotional well-being is promoted through continuous monitoring and effective care and support. People are supported to stay healthy through their diet and exercise in line with their desired outcomes. They attend their health and dental appointments so they can meet their well-being goals. Ongoing family contact is fully supported with family able to come to the home for a visit or take people out.

People are protected from abuse and neglect because staff are trained in safeguarding and there are policies and procedures to guide them. Each person has their own private accomodation, each living on a different floor of the home and their privacy is respected. Staff enjoy a good relationship with the manager and feel confident to raise any concerns should they have any.

People are supported to do things that matter to them and take advantage of what is going on in their community. They engage in recreational hobbies, visit local cafes and shops, go to the local beach and meet friends in weekly social events; they do things that make them happy and feel part of their community.

The home is a comfortable and very homely environment; it is decorated and furnished to provide a pleasant place for people to spend time. Each person's bedroom is personalised as they choose how they want it to look and keep things that are important to them. People are supported to prepare their own food in the kitchen if they wish and they contribute to keeping their own rooms clean and tidy. There are plans to renew some areas in the kitchen such as new white goods. There is a seating area outside in the garden from where people can enjoy the views, and a games room.

Care and Support

People living in Glencoe Villa are provided with the quality of care and support they need to achieve their outcomes and in the way they prefer. On admission into the home, the manager completes an assessment of the person's needs and desired outcomes to ensure the service can provide the right resources. Information is gathered from the person wanting to live in the home, their relatives and professionals who know the person well.

Personal plans are designed taking into consideration all the information people, their relatives and professionals have provided. These instruct staff on each person's outcomes and how these are to be achieved. They include risk assessments, positive behaviour support plans and guidance on supporting people with their needs and preferences. These plans are reviewed every three months to keep them accurate.

People's care reflects and respects their preferences. We observed a staff using their skills and expertise to calm a person who was becoming distressed. Their actions reflected the instructions on the person's positive behaviour support plan and were effective in reducing the person's distress. Plans and risk assessments focus on people's strengths as well as their needs, so they can continue to use and enhance the skills they already have. We saw examples of people learning skills towards living more independently, such as shopping, cooking, and cleaning. We saw photographs of a person proudly showing the cake they had baked. People are encouraged to do what they can for themselves, and accomplishments are celebrated. We received positive feedback about the 'Fantastic' staff from a visiting relative, and a professional told us how they 'Go above and beyond' to promote and maintain effective family contacts.

People are supported to access healthcare and the support of other professionals to improve their life and to achieve their well-being outcomes. We saw evidence of appointments and treatment from a dentist, a GP had been called for one person's illness, a social worker visited to complete a review and check progress. The service sourced a wheelchair of another person so that they can go out more often. The service manager attends multidisciplinary meetings to ensure people receive expert support when required.

There are safe systems in the service for managing medication. Trained care staff support people to take their medication, accurate records are kept, and medication is safely stored. The manager completes audits of medication records and storage and undertakes competency checks on staff administering the medication.

Environment

The service is provided in a homely environment that helps people achieve their outcomes. Each person occupies a different floor of the home, the layout is like an apartment, each with a lounge, and a bedroom with en-suite. People are encouraged to use the communal kitchen to help prepare vegetables, cook a meal and bake. People's own space is personalised with their own pictures and things important to them. A fridge has been provided for one person who likes to keep food and drinks in their room. People are supported to enhance their housekeeping skills so they can be more independent; where able, they are supported to take care of their own rooms. All areas of the home used by the people living there are freshly decorated and furnished, clean and tidy. The home is close to shops in the village and a short walk to the beach. There is regular public transport, and the service also has its own transport to take people out.

Overall, the provider has sufficient arrangements in place to help ensure the building is safe and free from hazards. The manager identifies areas for repair or renewal through regular checks of the building and the RI also walks around the home during their visits to check for possible improvements. Maintenance arrangements ensure repairs and renewals are addressed quickly. We saw the manager has risk assessments in place to help ensure people are always safe in the home while allowing them to take some risks and maintain their independence. Safety checks are routinely carried out to ensure electrical, gas and fire safety in line with regulatory requirements and the manager has arranged for further up to date tests on electrical appliances.

Leadership and Management

The service has governance arrangements in place to help ensure the service operates smoothly. The manager is supported by experienced staff and the RI visits the service to check it is compliant and operating as expected. Routine audits of different processes are carried out to check continued safety and effectiveness, such as checking medication arrangements, a regular walk round of the building to check for maintenance issues, audit of files to check they are accurate. The RI meets with staff to seek their views on what is working well and to identify areas for improvement. Staff meetings are held regularly, so everyone can discuss potential plans for the service and to progress with achieving positive outcomes for people living here.

The RI visits the home every three months and speaks to people, and the staff who support them, to gain their views. They check various aspects of the service to ensure processes are audited and the service is compliant and safe. The RI audits had not identified the overdue electrical tests in a timely way, and they confirm they will add these checks onto their routine visits. The RI meets with the manager and are kept aware of changes in the service and any resource issues. They carry out bi-annual quality of care reviews and complete reports to evidence what is working well and identify what could be improved.

Staff are employed in sufficient numbers to support people to achieve their outcomes and carry out activities when they want to. We saw rotas are developed to ensure the right support is provided at the right time; staffing is flexible to suit people's needs. A relative shared their experience of a staff coming in to work on their day off to help support someone to hospital. Employment records show a thorough recruitment process is followed, ensuring only suitable care staff are employed. Mandatory training provides staff with the expertise they need to meet specific needs. Staff have one to one supervision meetings with the service manager every eight weeks to discuss their work and experiences and they receive feedback about their performance. They told us they feel supported and valued.

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	
18	Regulations require that services complete a provider assessment within 7 days of the start of any placement. This assessments is to be made available and reviewed and updated if there are significant changes. The service had not been completing provider assessments for the individuals living at the home.	Achieved
14	The service provider has not documented and evidenced that pre-admission assessments have been completed. They have failed to evidence they have assessed the individuals needs and conclude how their service will be able to meet the needs of the individual. They have failed to consider how the admission is compatible with individuals already resident at the home.	Achieved

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