



Inspection Report on

Glynbargoed Care Home

**Glyn Bargoed House
Glyn Bargoed Road
Treharris
CF46 6AA**

Date Inspection Completed

22/01/2025

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About Glynbargoed Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Roemmarsh Limited
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	31 January 2024
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People living in Glynbargoed Care Home receive care and support in a warm and friendly environment. There have been some additional pressures on care staff which both the manager and the Responsible Individual (RI) are working to alleviate. Agency staff have been used where needed, and the core team of care staff know people well and can successfully anticipate their needs. Care documentation is reviewed and updated with changes in need. Most people spend their time in the communal lounge, where an activities co-ordinator engages and interacts with them throughout the day. There are gaps in training and supervision which need to be addressed before the next inspection. The environment is safe and hazardous areas now locked as required. The Responsible Individual has good oversight of the service being provided in the home and works with the manager and staff to continue to maintain and improve the quality of care.

Well-being

People are supported and encouraged to make decisions about their daily routines where they are able. People have their routines documented in the care plans. There is a main communal lounge and a smaller lounge where some people spend their time when they want more quiet surroundings. There are meal choices for each meal. Kitchen staff are aware of dietary needs and care staff know people's preferences. Some people choose to sit in the lounge for meals, but there is not enough space in the dining room for all residents to sit should they all wish to. We discussed this with the RI who advised he is looking at ways to optimise the space in the home to give more flexibility.

Care staff at Glynbargoed Care home support people to be as healthy as they can be. We saw evidence of discussions with community nurses, and GPs, and referrals to health specialists when required. A few people living in Glynbargoed have increased needs as their physical health has deteriorated. Care staff have documented these needs appropriately and management have requested nursing assessments to ensure people are in the right setting for the care they need. The RI responds effectively to feedback from the manager and care staff and has increased staffing levels during busy periods of the day to assist with the pressures of people's additional care and support needs. Medication is stored safely and administered as prescribed. The senior on shift was able to competently explain people's medication needs and the process for booking, recording, and returning medication.

There are some systems in place for protecting people from harm or abuse. Incidents and accidents are recorded and notified to CIW as appropriate. Safeguarding training refreshers need to be followed up to ensure all staff have the most up to date information to be able to identify and report any safeguarding concerns. There is a safeguarding policy in place at the service.

Care and Support

During our visit, we saw warm and caring interactions between care staff and the individuals living in Glynbargoed Care Home. We observed staff provide reassurance or distraction to people depending on what they needed at the time. We received positive feedback from people living at the home and their relatives. One person told us: *“it’s going well here, we’re fine”*. A family member said: *“they’re very caring. They love the people here, they’re like a family”*.

Care staff have the information they need to provide people with the right care at the right time. We sampled care files of people whose needs had changed since our last inspection and found all care plans and risk assessments regularly reviewed and appropriately updated with the changes. Core care staff know people they support very well, and were easily able to discuss people’s routines, current health, likes and dislikes. 24-hour charts have been completed where required to provide additional information for nursing assessments. Supplementary charts are completed throughout the day. Accidents and incidents are logged. Engagement with activities could be noted more consistently in daily notes to give an idea of people’s engagement and enjoyment of the things that are offered to them.

There are sufficient infection control measures in place. We observed personal protective equipment (PPE) being used appropriately for close contact care. The domestic and laundry staff team is small, and we observed them cleaning through the home throughout the day.

Environment

People live in a safe and secure environment that offers some flexibility of space. The home is set over two floors, there are stairs with stairlifts, but no lift, which is a consideration made when the manager completes pre-admission assessments. There is a communal main lounge and dining room, a smaller quiet lounge, and a dedicated visitors room. People are free to move around these areas as they wish, and care staff support them to do so if needed. We discussed use of space with the RI as the dining room and main lounge are not big enough to accommodate all residents should there be occasion where they all want to be in the same room. People's bedrooms are personalised and contain their personal belongings, and the décor in general gives a warm, homely feel.

At the time of the last inspection, areas of the home that contained potential hazards to people's safety were not locked and easily accessible. We checked all areas at different times during this inspection visit, and found they were all secure and therefore risk of harm is now minimised. There is a maintenance worker employed to complete regular monitoring checks and small repair or replacement jobs. External contractors are also employed to complete servicing and maintenance of facilities and utilities, such as mobility aids, stairlift, and the fire system. The entrance to the home is locked, and visitors make themselves known to staff on arrival. Personal emergency evacuation plans are in place, detailing what support would be needed for people to evacuate the building safely.

Leadership and Management

People are supported by an experienced, cohesive team of care staff. Since the last inspection, there have been some sickness and absences in the staff team which has meant that agency staff have been employed to supplement staffing levels. This, coupled with the increased needs of some people living in the home has placed pressure on the core staff team. We discussed this with the manager and RI and saw evidence that this is being responded to. Staff told us: *“the care here is very good, it’s the best. But at the moment it’s so busy”, “we know [manager] is trying to sort things out”*. We observed good communication between care staff about who was doing what and where in the home they would be. Many of the core staff team have worked at the home for many years.

Staff are safely recruited for their roles, but improvements are needed in staff support and training. We sampled some staff personnel files and found they contained all required recruitment and vetting information. Staff are working with a current Disclosure and Barring Service (DBS) security check. From viewing training records, we noted gaps in refresher training in core subject areas which are relevant to the needs of the people living in Glynbargoed Care Home. Staff told us they felt they would benefit from more training refreshers, although they do have e-learning available to them. We also saw not all staff have supervision three monthly as required. The opportunity for one-to-one discussion with their line manager is important for staff to be able to discuss any issues they are having or what their development needs are. The manager has an open-door policy, but discussions need to be formalised. We informed the RI that this was an area for improvement, and we would follow up at the next inspection.

There are quality assurance processes in place. The RI has overall oversight of events in the home and completes quarterly quality monitoring visits and biannual quality of care reports as required by regulations. The RI visits the service frequently and is building good working relationships with management and staff. The manager, deputy, and administrative assistant all work well together, and provide stability to the staff team.

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
36	Staff are not all up to date with mandatory training, and have not received supervision at least three	New

	monthly.	
44	The provider has not reduced potential hazards to safety as much as possible. Areas containing potential hazards need to be locked to prevent access to people living at Glynbargoed.	Achieved

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