



Inspection Report on

Cae Glas

**82 Vale Street
Denbigh
LL16 3BW**

Date Inspection Completed

30 May 2022

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About Cae Glas

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Potensial Ltd
Registered places	25
Language of the service	English
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. This is the first inspection of the service since it was re-registered under the Registration and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People living in the home are content with the way they spend their day; they are encouraged and supported to follow their own hobbies and interests with the service investing in related essential equipment such as the greenhouse for gardening enthusiasts. The cook holds sessions that allow people to assist in the kitchen, prepare a meal and learn new skills for which they are awarded a certificate. People enjoy the food and are regularly asked about their preferences. The service does not currently have an activities co-ordinator which restricts opportunity for creative activities but is actively seeking someone for the role.

Currently there is no permanent manager although the interim manager is present at the service and there are regular audits and checks carried out to ensure smooth operation of the service. Staff are skilled and experienced to ensure they can provide effective support to people living here. Many have worked at the home for a long time and their interaction with people is familiar and relaxed.

The home has spacious communal areas for people to spend time where they wish and the garden caters for people who want to sit outside. Many rooms do not have en-suite facilities and some are small however there are plans to change the layout of the building in a way that will resolve this.

Well-being

People have choice and control over most of their day at the service. They can choose when to get up in the morning as breakfast times are flexible. People's views are sought frequently to be certain of ongoing food preferences and the pictorial menu offers choices for each meal. People have their own hobbies and interests which they are supported to follow including learning I.T skills at local education facilities and cooking skills with the cook in the home's kitchen. A separate kitchenette allows people to prepare their own drinks whenever they want one. People are content spending their time as they wish although the current absence of a designated activities co-ordinator restricts opportunity for creative stimulation. Efforts are being made to employ a person for this role.

People's physical and mental health is monitored and the advice of health professionals sought when needed. We saw appointments have been made with GP's, dentists and diabetes nurse and the home has regular input from the local mental health team. Regular reviews identify where there are any issues and families are involved if any changes to care are needed. A key worker system means care staff spend more time with individuals and can swiftly recognise if people have concerns or issues that need to be dealt with.

As staff are trained in protection of vulnerable adults, and safeguarding policies also guide practice, people are protected from poor practice or abuse. It is evident prompt action is taken to maintain people's well-being. Risk is assessed and measures put in place where needed to protect people.

The home offers spacious communal areas for people to socialise or spend quiet time and a large garden including a covered area so people can sit outside whatever the weather. Some bedrooms are small and afford little space to dress or indulge in hobbies or other interests. A lot of rooms do not have en-suite facilities and up to four people share a toilet/bathroom on one floor. There are plans to change the layout of the home, to make better use of empty rooms, improve bedroom space and provide more en-suite facilities. This will enhance people's comfort, give them more room to enjoy their own hobbies and promote their privacy and dignity.

Care and Support

Individuals are provided with the quality of care and support they need through a service designed in consultation with the people and their representatives. Monthly key worker reviews allow the opportunity for residents to discuss any issues they have and make changes to care planning if required. Surveys are used to gain views and formal reviews of care planning take place at least every two months to keep plans accurate. Records show people's wishes and aspirations are considered as well as any risks and specialist needs. Care planning is person centered and show what is important to each individual. People talked to us about their hobbies and we saw how the service encourages and supports this. There is a greenhouse for a person who enjoys gardening, another person has a fish tank. One person has attended a course in college to learn about how to use computers and now has his own tablet computer. The service has recently invested in a rehabilitation kitchen so that people can make their own drinks and the chef holds a 'cooking academy' to allow residents to take part in cooking with him. They earn a certificate as a result to celebrate new skills. Mealtimes are flexible allowing people to get up when they want; regular surveys canvas views on what people like to eat and pictorial menus of the day are displayed. We saw the chef is very qualified and enthusiastic in his role; he has worked at the service for many years and knows people well. The Environmental Health Office have recently awarded the catering part of the service a level 5 which is the best it can be.

Records show risk assessments are completed for every individual to ensure they can engage in all aspects of daily living with minimum risk to their wellbeing. People are supported to live how they want to while ensuring they are safe. There are risk assessments for those who smoke and outdoor shelters are provided for their comfort. There is currently no staff designated to the role of activities so the opportunity for creative stimulation is limited, however we saw people are able to carry out their own interests. There is a pool table and dart board. Events such as birthdays and other celebrations are celebrated with special meals, activities and decorations.

The service provider has mechanisms in place to safeguard vulnerable individuals to whom they provide support and care. Staff are trained in safeguarding and they must adhere to safeguarding policies designed to protect people. There are regular surveys and audits which help ensure safe, effective practices.

Environment

The service provider needs to make some changes to ensure individual care and support is provided in an environment with facilities that promote achievement of their personal outcomes. We saw nine rooms do not have en-suite facilities; one area of four bedrooms only has one toilet to share. One room was very small and cramped leaving little space for to occupant to dress and move around. There are vacant rooms that could be utilised to rectify this issue. The interim manager confirmed there are plans to resolve this matter and the use of alternative rooms will be considered for those people currently using smaller rooms; plans to change the layout have been drawn up and agreed by the registered provider.

There is a large dining room which accommodates everyone so they can enjoy their meals together; two lounges each with a television and games; and a rehabilitation kitchen in which people can spend their time. Outside there is a large space with garden furniture and a covered area for shelter. A greenhouse provides an opportunity to grow plants and vegetables. We saw the home is mostly clean and tidy although people may keep their rooms as they wish. A housekeeper is employed to clean the home five days a week and key workers support people to keep their own rooms clean and tidy; a deep clean is also done by the house keeper.

The service provider identifies and mitigates risks to health and safety. There is a maintenance person employed who carries out checks and keeps the building maintained. Numerous checks and measures are in place to keep the building safe. We saw evidence of an inspection of the electric installation, testing of electrical appliances, and safety of water temperatures including tests for legionella risks and heating. Fire safety is ensured through provision of tested fire equipment, emergency lighting, and fire exit signs. Staff are trained in fire safety and there are evacuation instructions posted around the home.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service and to help ensure quality care is provided. The current management arrangements are temporary with an experienced interim manager in place. The responsible individual, designated to have oversight of the home, visits every three months to carry out audits and checks. Additionally there is a quality of care review report completed every six months to identify what is working well and where improvements need to be made. Medication administration and storage is frequently audited to ensure continued safe practice. Surveys are carried out to ascertain the views of people, their representatives and other professionals. We saw how one such view raised an issue which was immediately considered and remedial actions put in place. The management of the service listens to people and takes appropriate action where needed.

People are supported by a service that provides appropriate numbers of staff. Records show these staff have been employed through a safe recruitment procedure that checks for suitability. Training is provided to ensure they have the knowledge, competency, skills and qualifications to provide care and support in a way that helps individuals to achieve their personal outcomes. We saw staff rotas ensure adequate numbers of staff are on duty with a combination of required skills. We observed staff are able to swiftly respond to requests for support and are vigilant so as to pre-empt such needs. Competency tests are carried out following training in some areas to ensure people can put into practice what they have learned. Some staff have worked at the service for a long time and are able to guide and mentor newer staff.

The service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable. More investment is planned for the environment and this will support people towards greater comfort, space, privacy and dignity, especially where people are sharing one bathroom or occupying small bedrooms. Some areas in the home have been refurbished such as the floor in the lounge and kitchen. The furniture is domestic in style and suits people's needs and preferences.

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
N/A	No non-compliance of this type was identified at this inspection	N/A

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