



Inspection Report on

Glasfryn (L'Arche)

Brecon

Date Inspection Completed

26/07/2023

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About Glasfryn (L'Arche)

| | |
|---|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | L'Arche |
| Registered places | 6 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 12 July 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

Glasfryn is the only Welsh service (community) in the international L'Arche network. L'Arche believe that the creation of mutual, equal relationships is critical for the wellbeing of people with learning disabilities. This is clear to see in the interactions we observed and feedback we were given during our visit. The ethos of inclusivity ensures people are consulted in all things and empowered to make their own decisions.

Improvements have been made in the content of everyone's personal plans. These are now being reviewed regularly and people's daily events and activities being more consistently recorded in their notes. Care workers and management thoughtfully consider any additional support they can provide to make people feel more safe, more relaxed, or better informed in any aspect of their lives.

The environment is suitable for the needs of the people living there, and there are plans in place for refurbishment. The Responsible Individual (RI) spends a lot of time at the service and has built good relationships with the people who live there. Some care workers stay and work at Glasfryn as part of a cultural exchange, which enhances people's life experiences and have led to long lasting support networks. Quality of care is fully monitored, analysed, and reported as required.

Well-being

People are treated with respect and their individuality is supported and celebrated. The ethos of the service is to promote mutual relationships and using the power of community to help people fulfil their aspirations. Care staff provide exemplary support to people to make long term plans, broken down in to short term goals. Depending on their aspirations, care staff support people to learn a variety of practical living skills such as budgeting of their finances, safety when out in the community, and improving confidence and skills in social situations. People's interests are understood, and care workers go beyond expectations to facilitate them. They are empowered to maintain a support network, with care workers enabling them to visit friends in person, and virtually. There is a workshop in the local town run by the L'Arche organisation that provides recreation and purposeful activity for people. There are also craft groups they attend, and shops they work at. People living at the service are consulted over any suggested change to their environment or their care routines. All information is delivered in an 'easy read' format, and time is taken to ensure everyone has understood the consequences of all the options before deciding. Some people sit on recruitment panels for new staff, and other participate in national networks.

People are supported to be as healthy as they can be. Care workers provide support in conjunction with people's multidisciplinary teams, including learning disability nurses and psychiatrists. The service also supports people to get additional specialist support, such as psychology support to help with anxiety and improve communication and relationships. We saw how effectively this helped people by the way they spoke, and how well they were able to articulate their emotions and their current needs. Medication is stored safely, administered as prescribed, and appropriately recorded. One person is working towards independence and so is included in their medication process as much as possible.

The home environment at Glasfryn supports people's wellbeing. There are plans in place for a neurodiverse kitchen, considering accessibility, noise and lighting. Some areas of the home have already been adapted in response to people's needs, such as an extended bedroom with tracking hoist and ensuite, and an annexe flat for people who are working towards independence.

Care and Support

Feedback about the service is consistently very positive. People told us: *“I’ve been doing really well, I’m really happy”, “everyone here is so helpful and lovely”*. A professional, who visits the service regularly, told us: *“this is a service I really admire. There is an equilibrium here, and the person’s wishes are always the starting point”*.

There is detailed information available about the care and support people need to achieve their personal outcomes and minimise risk to their safety or independence. This means that care workers can give people the right care and support at the right time. At the time of the last inspection, not everyone had personal plans that explained the day-to-day support they needed to live the life they wanted to. Now, all personal plans are thorough, detailed and person centred. The evaluations that were being done are also now consistently recorded and daily notes show the variety of care and support that people receive each day. This feeds into the innovative long-term pathway plans that people have created to identify their specific goals over the next few years. At this inspection, people proudly told us about the progress they had made since our last visit. The service goes over and above to offer additional support to people at key times it is needed, for example during hospital stays.

People are safeguarded from potential harm or abuse. Risk assessments and management plans identify warning signs for risky or distress related behaviour, as well as when and how intervention is needed. Care workers have received safeguarding training and report they would be confident to discuss any concerns with the manager or RI and these would be acted upon. There is a safeguarding policy at the service for additional guidance, should it be needed. The RI advised that they are aware of the potential inconsistencies in perception of safeguarding concerns depending on the cultural backgrounds of overseas care workers. However, this is addressed as part of new care workers’ induction programme and any questions or issues are openly discussed.

There are infection control measures in place. Care workers complete all domestic and laundry tasks in the service, with people being supported to complete as much of this themselves as they are able. Care workers are aware of good hygiene practices. On the day we visited, the service was clean and tidy.

Environment

People's environment supports their wellbeing and enables them to be as independent as they can. Glasfryn has a main house and an annex with a self-contained flat. The flat has its own entrance. There are two downstairs bedrooms for those who are not able to use the stairs. People's bedrooms are personalised and contain all their belongings. One room has an ensuite bathroom and accommodates a tracking hoist. There is an accessible, functional, and pleasant outdoor space, which people like to use in the good weather. There are plans in place to replace the current, domestic, kitchen with a new extended kitchen area. This will be both accessible to wheelchair users and people with mobility issues, but also sensitive to the sensory needs of neurodiverse people, with adjustable lighting and low noise emitting appliances.

There is a schedule of maintenance and servicing in place to be sure that all utilities and facilities are safe to use and fit for purpose. The RI advised that there is a member of staff for gardening and low level maintenance, but that the service, and the organisation, has good links with local contractors who work with them on a regular basis. There has been a recent fire safety inspection, and the service completed all the required work resulting from this. Fire alarms and emergency lighting are regularly tested. People have a personal evacuation plan, which details the assistance they would need in the event of an emergency.

Leadership and Management

People are supported by a small, but consistent team of staff, with whom they have built very strong relationships. Up to four care workers in the team can move between L'Arche services, internationally, and so there is a diverse staff team who come to work at Glasfryn from all over the world. Some people living at Glasfryn have built relationship with previous care workers and are supported to continue to maintain connections with workers who have left for sister services. There is a strong ethos in the team of 'family values', giving time and effort to people living in the service not because they have to, but because they want to be there and make people's lives better. Care workers told us: *"I've never done care before but it's amazing here, everyone really cares", "we learn as much from the core members [people living in the service] as they do from us", "[manager and deputy] have really helped me feel so confident and comfortable working here"*.

People are recruited and vetted for their roles. Recruitment information, including visas for overseas workers, is up to date. Care workers are subject to a disclosure and barring (DBS) check. There is a thorough induction process, created by the organisation in line with the Social Care Wales (SCW) Induction Framework. Training records are broken down into core training and then training specific to the needs of each person living in Glasfryn. Supervision is regular, so people can discuss their professional development and any areas of concern. We were also told the manager and deputy manager are very approachable. Both do shifts 'on the floor' and so are very involved with the day-to-day events in the service and are very familiar to the people they support.

There are robust quality assurance processes in place to drive and maintain excellent standards of care and support. The RI visits the home regularly and is well known by the care workers and people who live at Glasfryn. Monitoring visits and quality of care reports are produced from thorough analysis of events, and constant consultation with everyone at the service. The results of the reports are fed back to the organisation's board of directors. The RI is involved in an innovative political project for L'Arche's 50th anniversary, to improve awareness and visibility of learning disability rights and support. The service has strong links with other organisations in the area and networking opportunities further promote awareness.

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 |
| 15 | All people receiving care and support from the service should have a personal plan in place detailing what is required on a day to day basis to meet their needs. | Achieved |
| 16 | Personal plans and risk assessments are not reviewed at least every three months. | Achieved |
| 59 | Supplementary care information is not being logged consistently, or in line with people's care needs. | Achieved |

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