



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

The Glynne Home



49 High Street, Caergwrle, Wrexham, LL12 9LH



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www.sscare.co.uk

The inspection visit took place on 02/07/2026

Service Information:

Operated by:	S & S Care UK LTD
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	21
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

The Glynne achieved a good rating in each of the four themes: well-being, care and support, environment, and leadership and management. People living at the home are supported, where possible, to lead lives that reflect their preferences and aspirations. They receive person-centred care from staff who know them well, promote dignity, choice and independence, and respond proactively to changing needs. People and their relatives speak positively about the quality of care, and the care staff demonstrate a strong commitment to person-centred practice.

The environment is comfortable and welcoming, with ongoing investment in refurbishment and improvements to ensure it remains suitable for people's needs. Leadership and management are effective, with visible and supportive leaders providing oversight through governance and quality assurance systems. Staff receive regular training, supervision and support, promoting a positive culture focused on continuous improvement and positive outcomes for people living at the service.

Findings:



Well-being

Good

Well-being is good because people living at the service are consistently supported to achieve positive well-being outcomes and maintain meaningful and fulfilling lives. During our inspection, we found people appeared comfortable, relaxed and cared for. We observed warm and respectful interactions between people and care staff. Care staff know people well and support them in a kind, patient and person-centred manner that promoted dignity, choice and individual preferences. Care staff take time to understand people's individual preferences, life histories, interests and aspirations. Resident feedback provides opportunities for people to influence life within their home, contribute ideas, and shape activities and events. We found the provider promotes a culture that values personal identity and meaningful relationships. People and their relatives provided positive feedback about the quality of care and support provided by care staff.

The care staff demonstrates a strong commitment to person-centred practice. The provider has achieved Silver Accreditation through the Progress for Providers programme, recognising its work in supporting older people and those living with dementia. Evidence reviewed during the accreditation process shows a clear focus on understanding people's life histories, supporting choice and decision-making, respecting dignity, encouraging independence, and working in partnership with families. Care staff work proactively with health and social care professionals to identify changing needs at an early stage and respond promptly to ensure people receive the right support.

A dedicated activities coordinator demonstrates a commitment to providing opportunities that enhance people's well-being and quality of life. We reviewed the activity planners, which demonstrate a variety of opportunities for social engagement, including arts and crafts, gardening, baking, exercise sessions, themed events and church attendance. We identified opportunities to further strengthen person-centred engagement, particularly for people who may benefit from more individualised support and those living with dementia. Care staff promote and uphold people's dignity, individuality and rights. Additionally, we found Deprivation of Liberty (DoLS) arrangements are appropriately monitored, with authorisations, review dates and renewal processes managed in line with requirements. The service displays bilingual signage throughout the home, and some staff speak Welsh. People live in accommodation that meets their needs, and bedrooms are personalised. People have access to equipment and facilities that are regularly maintained to support their well-being. Outdoor space is accessible and safe.



Care & Support

Good

Care and support is good because people receive care and support from a service that understands their needs and works proactively to promote their health, safety and well-being. We reviewed a sample of care records and found assessments and care planning documentation contain detailed information to guide care staff in delivering safe, consistent and person-centred support. Care records include information about people's physical health, mental health, nutrition, mobility, continence, communication needs, medication and individual preferences. This enables care staff to understand people's needs and respond appropriately to changes in their circumstances. We found examples of strong person-centred practice within care documentation. Care records include detailed life history information, relationship mapping and personalised guidance to help care staff understand what is important to people and how best to support them. Records also demonstrate people's involvement in planning their care and support arrangements. The service uses a range of risk assessments to support people's safety while maintaining their independence. We reviewed assessments relating to falls, pressure care, nutrition, moving and handling, call bell use, and emergency evacuation arrangements. These assessments identify potential risks and provide guidance for care staff on how to minimise harm and promote positive outcomes.

We found particularly positive evidence in relation to falls management. Documentation demonstrates a comprehensive assessment of risk factors. The staff identify patterns in falls and act on concerns promptly. Records showed regular involvement from GPs, district nurses, chronic disease nurses and opticians to support people's health needs. Care staff maintain communication with families and keep them informed of significant changes in health and well-being. Consent documentation is available, and legal arrangements, including Lasting Power of Attorney where applicable, are appropriately recorded. People are protected from harm because staff understand their safeguarding responsibilities and respond appropriately to concerns. Leaders make timely referrals to relevant agencies when required and oversee effective safeguarding processes. Medication management systems provide assurance that medicines are administered safely. Audits demonstrate effective oversight of medication processes, including staff competency assessments, controlled drug management, storage arrangements, stock checks and incident reporting. Relatives describe staff as approachable, caring and flexible in responding to individual needs.



Environment

Good

The environment is good because people live in a home that provides a comfortable, welcoming and increasingly well-maintained environment. During our inspection, we found the provider had invested in improving the physical environment and demonstrated a clear commitment to ensuring the premises remain suitable for the needs of people living at the service. The provider supplied a comprehensive development plan that evidences a sustained programme of refurbishment and improvement across the home. The plan covers bedrooms, communal lounges, dining areas, corridors, outdoor spaces, the conservatory and ancillary rooms, demonstrating a proactive and planned approach to environmental development.

People personalised their bedrooms with photographs, personal furniture, televisions and possessions, helping to create a homely atmosphere and supporting their identity and sense of belonging. The provider had also refurbished and enhanced communal areas. The development programme includes important maintenance works such as electrical improvements, radiator replacements, door repairs, worktop replacements and damp treatment. The service also maintains effective oversight of statutory and routine maintenance requirements. We reviewed maintenance systems that demonstrate regular monitoring of fire safety systems, PAT testing, gas safety, legionella controls, asbestos reviews and lifting equipment inspections. Records show the provider plans future maintenance dates in advance, providing assurance that staff actively manage maintenance obligations.

Outdoor spaces further enhance the environment. The garden area is secure, accessible and well maintained. Care staff manage food storage arrangements appropriately, laundry facilities are available, and dedicated cleaning staff maintain the premises. Safety features, including window restrictors, accessible call bells, secured furniture and other risk-reduction measures, further support people's safety and well-being. Care staff attend regular fire drills and receive training to ensure they know how to respond in emergency situations. Managers also provide training on the safe use of equipment, including moving and handling equipment, to minimise risks to people.

Whilst the environment meets the threshold for a good outcome, opportunities remain to build on the progress already achieved. The provider should continue strengthening environmental audits and quality assurance processes to ensure refurbishment standards, cleanliness and maintenance remain consistently robust. In addition, the current office and pharmacy arrangements require review, as space is restricted.



Leadership & Management

Good

Leadership and management is good because people benefit from visible, approachable and supportive leadership that promotes a positive culture and provides effective oversight of service delivery. Throughout the inspection, managers were organised, responsive and fully engaged with the inspection process. We received positive feedback from people living at the service, relatives, care staff and external professionals about the management team. Relatives spoke positively about communication and responsiveness, while healthcare professionals described constructive working relationships and timely responses to concerns.

The provider has established comprehensive governance systems to monitor the quality and safety of the service. We reviewed a range of audits, action plans and monitoring systems covering care planning, medication management, staff training, DoLS, falls prevention, health and safety, moving and handling equipment, mealtime experiences, oral health and environmental standards. We found evidence that managers regularly review information, monitor compliance and take action where required.

Leaders demonstrate a clear commitment to workforce development. The provider maintains a comprehensive training programme covering safeguarding, medication administration, infection prevention and control, dementia care, moving and handling, person-centred care, fire safety, first aid, nutrition, and Mental Capacity Act and DoLS requirements. Care staff also have access to specialist learning opportunities, including dementia care, palliative and end-of-life care, safeguarding and reflective practice. Care staff told us they felt well trained and equipped to meet the needs of people living at the service. Records show that care staff maintain current Social Care Wales registration.

The management team actively engages with care staff through regular staff meetings, supervision sessions, appraisals and competency assessments. Staff meetings take place regularly and provide opportunities to discuss care standards, safeguarding, health and safety, infection prevention and control, teamwork and quality improvement initiatives. We found evidence that managers communicate expectations clearly, encourage staff to raise concerns and reinforce professional standards. Staff spoke positively about teamwork and describe managers as supportive and approachable. People living at the service are encouraged to contribute to the development of the home. Resident forums take place regularly and provide opportunities for people to influence menu choices, activities, outings and social events. Records demonstrate that managers listen to feedback and act on it, reflecting an open and inclusive culture. The provider also seeks feedback through Responsible Individual visits and quality of care reviews, demonstrating an ongoing commitment to consultation and engagement.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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