Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Hafan y Coed Care Home

Nightingale Court, Llanelli, SA15 1HU

01554777775

www.barchester.com

The inspection visit took place on 19/03/2026

Service Information:

Operated by:	Barchester Healthcare Homes Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care
Registered places:	107
Main language(s):	Welsh and 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	Excellent
Care & Support	Excellent
Environment	Excellent
Leadership & Management	Excellent

Summary:

Hafan y Coed is an established care home in Llanelli providing residential, nursing and dementia care.

Wellbeing outcomes are excellent. Support provided promotes choice, independence and positive well-being outcomes. A varied programme of meaningful activities and strong community links enhances people's daily experiences.

Care and support are excellent. People living at Hafan y Coed experience a high standard of care that is person-centred and strengths based. Staff know individuals well and provide warm, respectful and compassionate support, informed by detailed digital care records.

The environment is excellent. It is clean, comfortable and has undergone high quality refurbishment. Communal and quiet spaces support choice and bedrooms are personalised.

Robust health and safety systems are in place.

Leadership and management are excellent. Management systems are strong, visible and effective, supported by robust governance arrangements that ensure continuous monitoring and improvement. Feedback from residents, relatives and staff is consistently positive, reflecting confidence in the quality of care, the supportive culture and the overall experience of living and working at the home.

Findings:

Well-being — Excellent

People experience excellent wellbeing outcomes and are supported to have choice and control over their daily lives. They decide when to get up, when to go to bed, and where they spend their time. There are several communal areas where people can spend time or more private places including their bedroom if they prefer a quieter area.

Care staff interact with people in a warm, respectful and unhurried manner. Personalised 'bubble' charts in bedrooms provide key information that helps staff initiate meaningful conversations and strengthen personal connections.

A *Life Enrichment* document is completed with each person to identify their interests and hobbies. This informs activity planning and ensures opportunities are tailored to what matters to individuals. A relative said; *"They go over and above what's required. It's the thoughtful little things, you don't need to ask they just do it".* Records demonstrate people are achieving personal outcomes and taking part in a range of meaningful experiences, including attending a Swansea City football match, visiting a local theatre performance of *The Sound of Music* and participating in a Strictly Come Dancing event. A wide range of individual and group activities are also organised at the setting. A relative said; "*We have afternoon tea, she has her hair done here which she likes*." People have formed friendships and one person told us; "*Lots of laughter goes on here*" and "*I have friends here*."

Family members and friends can visit at any time and are made to feel welcome by staff. One relative told us, *"I can just order a sandwich and cup of tea and we can go and sit in the living room, nothing is too much trouble".* Some relatives continue to volunteer at the service following bereavement, reflecting a strong sense of community. A monthly 'Dementia Café' provides advice and support to family and friends contributing to their wellbeing and understanding.

People choose their meals from a varied and nutritious menu and special dietary needs are well catered for. High-calorie snacks and drinks are available for individuals who require additional support with maintaining their weight. Meals are prepared from fresh ingredients and the head chef regularly speaks with people to ensure their preferences are met. The dining environment is thoughtfully presented, with tablecloths and flowers enhancing the mealtime experience. One staff member said; "*We're here to make sure they're happy*".

People feel safe. Risks are identified and managed appropriately and safeguarding procedures are understood by staff. Records show that concerns are reported and addressed in line with organisational and regulatory requirements.

Care & Support — Excellent

People receive care and support that meets their identified needs. The provider completes detailed initial assessments with individuals, their representatives and relevant health and social care professionals before accepting them to the service to ensure their needs can be met. Care records are comprehensive, person-centred and accurately reflect people's current needs. People told us they are happy with the care and support they receive. One relative said, "*Nothing is too much trouble, we are more than pleased".* Another relative said; *"The staff are just lovely. They don't pay them enough though. Can't fault them".*

Care documentation has been transferred to a digital system since the previous inspection. Care staff record information in real time, ensuring updates are accurate and immediately available. The system alerts senior staff if any element of care is missed, enabling prompt review at the end of each shift. Communication between staff is effective, ensuring changes in people's needs are recognised and responded to without delay.

A 'Resident of the Day' process is in place, providing a structured review of each person's care and support. All departments including care, housekeeping, maintenance, catering, hospitality and activities contribute to this review. This involves checking care records and confirming that the person's room is arranged according to their preferences.

Staffing levels are determined through a digital tool (DICE) which considers the assessed needs of each person. This helps ensure sufficient staff of a suitable skill mix are available on every shift. During the inspection, we observed a calm environment where people were supported at their own pace. People told us they do not wait long for assistance and do not feel rushed. Staff rotas reviewed during the visit confirmed staffing levels aligned with what we observed.

Staff are safely recruited with all the required checks and references in place prior to commencement to ensure they are of suitable character and have the required experience and qualifications. This includes an up to date Disclosure and Barring Service (DBS) check. Staff are registered with their regulatory body.

Medication is stored and administered safely and medication administration records are completed correctly. Records show that where people experience restrictions, appropriate legal authorisations are in place to ensure decisions are made in their best interests.

Environment — Excellent

The environment at Hafan y Coed supports people's well-being and promotes a good quality of life. The service has undergone significant refurbishment of a very high standard, resulting in a clean, comfortable and well-maintained setting. People have access to a range of communal areas as well as quieter spaces, enabling them to choose where they spend their time. Bedrooms are personalised with photographs, ornaments and other belongings, helping individuals feel at home. Many rooms are spacious and decorated tastefully. Refurbishment work is ongoing, with plans to upgrade all bedrooms and bathrooms to a consistently high specification.

Cleanliness and hygiene standards are high. Staff follow infection prevention and control procedures and use appropriate personal protective equipment. Environmental practices minimise the risk of cross-contamination.

The layout of the home accommodates the differing support needs of individuals. Each wing includes refurbished kitchen, dining and seating areas. People who have restrictions in place due to their care and support needs are able to walk freely within a safe, enclosed internal space, with access to a secure courtyard. The main garden provides further outdoor space with seating and raised beds and there are plans to develop sensory, dementia-friendly outside areas.

Robust environmental checks are in place. Routine health and safety monitoring is completed in line with regulatory and organisational requirements. This includes regular checks of water temperatures, nurse call systems, emergency lighting, window restrictors and general environmental safety. Maintenance records show prompt action is taken to address any defects identified.

The building is supported by an established maintenance programme. Essential equipment such as hoists, slings and profiling beds is serviced in accordance with required timescales. Fire safety systems are well managed: fire-fighting equipment is regularly checked, fire alarms are tested weekly and fire drills are carried out and recorded. A current fire risk assessment is in place and staff are familiar with evacuation procedures. There are personal emergency evacuation plans (PEEP) in place for each person and these are kept within easy access in the event of an emergency.

Overall, the environment is safe, clean, aesthetically pleasing and well maintained, providing a setting that supports people's comfort, dignity and independence.

Leadership & Management — Excellent

Leadership and management arrangements at Hafan Y Coed are strong, consistently effective and contribute to the delivery of high quality, reliable care. The service benefits from a stable and experienced management team. The manager is committed and passionate about providing the best outcomes possible for people and provides strong leadership and clear operational oversight, whilst maintaining a visible and purposeful presence within the home. There is consistent support from the wider management team and the manager feels extremely well supported. This stability continues to support excellent outcomes for people and ensures day-to-day practice aligns with regulatory requirements and organisational expectations. Staff describe the manager as motivating and inspiring whilst also demonstrating compassion and promoting a positive culture. One staff member said, "X *is a bundle of energy, she lifts mood, gets everyone motivated. A joy to work for".*

There are well-established governance systems in place which support continuous monitoring and improvement. Regular Responsible Individual (RI) visits, formal Quality Improvement Reviews and a comprehensive programme of internal audits provide structured oversight of key quality and safety domains. These include; clinical governance, medication, infection prevention and control, hospitality and nutrition. Risks are identified promptly and the service operates in a planned, accountable manner. A new RI has recently been appointed and is supported by the senior management team to continue providing effective governance.

Management oversight of incidents, notifiable events and safeguarding concerns is robust. Records show that information is recorded, analysed and acted upon in line with organisational policy and regulatory requirements. This supports learning and service improvement.

Engagement with residents, relatives, and professionals is positive. Feedback mechanisms are well established and results from recent satisfaction surveys indicate confidence in the leadership team and the care delivered.

Workforce arrangements are stable, with low staff turnover and several long-standing team members. Staff well-being is prioritised; holistic well-being support is available and the staff room has been recently upgraded. Staff told us they feel valued and confident in their roles. Management has taken steps to retain staff where possible, including identifying suitable alternative roles when individuals are unable to continue in their original position, demonstrating an inclusive and supportive approach.

Staff receive ongoing training and the majority of staff are up to date with their mandatory training. Where compliance is below expected levels, managers respond promptly with targeted actions to secure improvement. Records show that staff receive regular one to one supervision, providing an opportunity to discuss any concerns, identify areas of strength and any areas requiring further

training or development. Staff also feel able to approach the manager at any time if they have any concerns.

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.

Mae’r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh