



Inspection Report on

The Bay Nursing Home

**The Bay Nursing Home
Pier Road
Tywyn
LL36 0AL**

Date Inspection Completed

05/08/2024

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About The Bay Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	JSB Healthcare Ltd
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	16 October 2023
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

People are happy with the care and support they receive at The Bay Nursing Home. People receive care which is person centred and reflective of the information within care records. There is good oversight of the service and a commitment to continuing to develop the environment. The provider ensures people receive care which supports their overall wellbeing, with input from external professionals where it is needed.

Staff are safely recruited, well trained, and supported at the service. Staff are encouraged to take pride in their role and be responsible for specific areas of service provision. One person told us, *"There are some very special people here"* when we asked about the care staff.

The Responsible Individual (RI) carries out their role as required by the Regulations and supports the manager with the running of the service. People have access to information about the service which is available bilingually. Improvements are needed to the written policies within the service.

Well-being

People have as much control over their daily lives as possible. People choose how and where to spend their time. Some people spend time in the communal areas and others prefer the privacy of their room. People can access a safe outdoor space with picnic benches and parasols when the weather is nice. Items of interest are available within communal areas, and we saw people watching tv, listening to music and reading books, papers, and magazines. There is an activity schedule in place, and we saw people have enjoyed flower arranging, biscuit decorating, having visits from animals and choirs and going for trips to the beach. People told us there is plenty to do but they do not have to do it if they choose not to. We saw care staff taking time to sit and chat with people in the afternoon. The provider seeks people's views and suggestions through resident's meetings and annual feedback surveys. We saw there is a culture of openness within the service and people sought out the manager to say hello and ask questions. Without exception, people spoke positively about the manager and staff at the service, telling us they feel well supported and like who cares for them. We observed, kind, caring and patient interactions throughout the inspection. We observed people conversing in Welsh and watching the Eisteddfod on tv which they said they enjoy.

People's physical, mental health and emotional wellbeing needs are being met. People are supported with personal care and are supported to be dressed how they choose and can have their nails painted and hair done. The provider ensures people receive healthy and nutritious meals and snacks at the home, catering for specific dietary requirements and offering choice. We observed the mealtime experience and found it to be a pleasant and sociable part of the day. People's daily needs are met by care and nursing staff and additional support is sought from external health professionals if needed. The manager knows people well and has good oversight of all the needs of people at the service.

People are supported to maintain relationships and we saw several family and friends visiting the service. The provider helps people to maintain contact with relatives and friends who live away using telephone and video calls. We spoke with visiting family members who were positive about the support their loved one receive. We saw records of compliments from families and professionals which included feedback thanking the home for "support, kindness, attention, patience, care and dignity."

People are protected from abuse and neglect. Staff complete safeguarding training and use the systems in place to report concerns to the manager which are referred to the local safeguarding team if needed. All incidents, accidents and safeguarding concerns are reported in timely manner and are reviewed by the manager and RI to ensure all the required action is taken.

Care and Support

People who live at The Bay, receive care and support which is in line with their identified needs and considers their personal wishes, outcomes, and associated risks. People have an assessment completed before they move into the service to establish the level of care required and if the provider can meet their needs. People are encouraged to visit the service and have access to documents which inform them about what they can expect when considering living at The Bay. Care records are person centred and give detailed information about how to deliver care and support. Personal information about people's interests and wishes are recorded which means care staff know people well and can anticipate their needs. We saw records are reviewed on a regular basis using a 'resident of the day' process and are also updated when things change for people.

People are supported with all aspects of their wellbeing. The electronic records system creates prompts and alerts to ensure all care needs are met and any actions are flagged immediately to ensure these are addressed promptly. People receive support from external professionals such as the mental health team, dietician, occupational therapist and speech and language therapist. Any guidance from professionals is recorded within care records. Feedback from visiting professionals to the service is complimentary. The provider ensures staff access additional training and guidance provided by the health board and local authority.

Medication is managed very well within the service. We observed excellent medication practice during the day. The provider has systems in place to ensure medication is ordered, received, stored, and dispensed appropriately. The provider reported positive working relationships with the local pharmacy and GP to ensure this aspect of people's wellbeing is managed as well as possible.

People live in a service which promotes infection prevention and control (IPC) practice. We found the service to be clean, tidy, and free from malodours. Staff have access to personal protective equipment (PPE) if needed and audits of IPC are carried out.

Environment

People live in a service which promotes their independence and keeps them safe. External doors are secure to prevent access by unauthorised persons, and people can mobilise safely within the service without restriction. Records are kept of all visitors to the service for fire safety.

Processes are in place to monitor the environment which includes audits and routine maintenance carried out by a person employed in this role. The RI looks at the environment as part of their Regulatory visits and any actions needed are recorded and assigned to relevant person. Routine servicing of fire, electrical and gas safety is carried out within the service as required. The provider has invested in the service, installing new flooring in communal areas and people's bedrooms. A new internet system is in the process of being installed so people have better internet access, and there are ongoing refurbishments plans for the upstairs corridors and bathrooms. The service is bright, clean, and free from unpleasant odours. We saw the housekeeping team work hard to ensure people live in a pleasant environment.

People have access to equipment which supports their wellbeing and promotes independence. We saw people have specialist beds and seating which has been supplied by the provider to improve outcomes for people meaning they can sit in communal areas safely and not be restricted due to physical needs. Manual handling aids are serviced and maintained as needed.

People's bedrooms are clean and well equipped. We saw they are personalised with items of importance such as photos, ornaments, and furniture. The provider ensures people have access to a locked facility in their room. People who choose to spend time in their room have call bells and other assistive equipment in place to support their safety and wellbeing.

The service holds a level 5 rating following the most recent Food Standards Agency inspection, the highest which can be achieved.

Leadership and Management

People live in a service which is well led and where the management team are committed to providing a safe and quality service to the people who live there. There are good

processes in place to regularly audit different areas of service provision. The manager has appointed staff to be 'champions' in specific areas such as medication, activities, and mealtimes. They are responsible for auditing these areas, completing training, and keeping up to date with relevant legislation which is then cascaded to the rest of the staff team. The manager and RI have oversight of these audits and any actions needed which ensures ongoing monitoring of the quality and effectiveness of the service. People have access to information about the service which is available bilingually. Improvements are needed to the policies and procedures in the service. The provider must ensure that policies and procedures are in line with the good practice being carried out in the service and are reflective of current policy and guidance relevant to Wales. This is to ensure staff have access to accurate information which supports them in their role and builds on the training they have completed. People who use the service must have access to accurate information which informs them about where they live. Whilst no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People are supported by staff who are safely recruited, well trained and appropriately supervised. We looked at staff recruitment files and found the required checks are mostly carried out before a person begins working at the service. This includes disclosure and barring service (DBS) checks and obtaining satisfactory references. Staff are supported through the induction process and to register with Social Care Wales, the workforce regulator. We saw staff complete training in several areas which ensures they have the required knowledge and skills to support people safely. Nursing staff complete regular training to update clinical skills and maintain their professional registration. All staff receive regular one to one supervision through discussions, observations, and assessments of skill to support them with any identified training needs.

The RI for the service has regular contact with the manager for support and visits the service on a regular basis to carry out their regulatory visits. We reviewed the latest quality of care report which reflects how the service has performed over the last 6 months and includes positive feedback from people living at the service, family members and visiting professionals. The provider considers feedback from visiting professionals and any actions from reports which has improved the service provision and maintained the positive changes made.

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
12	The provider has not ensured that policies and procedures are updated in light of changes to	New

	practice, changing legislation and best practice recommendations. Policies and procedures are not entirely aligned to current legislation and national guidance, specific to Wales.	
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