



Inspection Report on

Awel Tywi

**Awel Tywi Home
Bethlehem Road
Llandeilo
SA19 6SY**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

06/02/2025

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About Awel Tywi

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Carmarthenshire County Council Adults and Children's Services
Registered places	38
Language of the service	Both
Previous Care Inspectorate Wales inspection	27/06/2023
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Care staff receive a wide range of mandatory and specific training opportunities. They are knowledgeable about the people they care for and this is corroborated by those living in the service and their relatives. Care records provide a sense of the individual, but additional details are required to better reflect how their current care needs are to be met.

The manager, deputy manager and senior carers make a strong leadership team. They are well supported by the Responsible Individual (RI) to deliver a service which is greatly valued by the people living in Awel Tywi, their relatives and visiting professionals. The RI visits the service regularly and uses these and a range of quality audit tools to ensure they have a thorough overview of the service.

The environment is clean with an ongoing programme of painting and upgrading in place. Further consideration could be given to Internal decorations to better support people living with Dementia. The communal gardens offer attractive and safe places for people to use and socialise.

Well-being

People are safe from the risk of harm and abuse. People and / or their representatives can raise concerns about the service and feel they will be listened to. Care workers go through a thorough recruitment procedure, receive regular supervision and training ensure they have the right skills, knowledge and approach to care. Care staff are very clear on their responsibilities to protect people and report any concerns. They are supported by regularly reviewed and updated policies.

People have the care they need. Care workers are knowledgeable, well trained and care about the individuals living in the service. They also have a good understanding of people's needs and how best to meet these. People can chose how their care is delivered. Care records provide information about the requirements and preferences of people; however, these can be further strengthened. The service proactively engages with medical and healthcare professionals to make sure people remain as healthy as possible.

People have their choices and views recognised. People personalise their bedrooms and choose their preferred meals. They get up and retire when they chose. The person and /or their representative are involved in the planning and reviews of their care. Their views about the service are actively sought by the RI through their Regulation 73 visits and through questionnaires used to inform the six monthly Quality of Care reports. People converse and receive information in Welsh if this is their preferred language.

People are able to achieve their well-being because of the environment. In the main, internal decoration supports people to orientate themselves around the service or to their bedrooms. Further consideration could be given how the environment can better support people living with Dementia. The gardens offer a safe place for people to relax, meet visitors and follow their hobbies and interests.

Care and Support

Care staff have a good understanding of the needs of the people living in the service. Care and support plans provide good information about the person, however, further details are required to clarify how the individuals care and support is to be provided. This will give care workers the required information to meet the persons needs and better ensure continuity of care and support. Accompanying risk assessments are regularly reviewed. There is evidence of the person and/or their representatives being involved in their care planning and reviews.

Health and medical professionals are proactively involved in the care and support of people. There are excellent communication links with the local GP practice who operate a weekly GP surgery at the service. A visiting GP told us *“This is an excellent service, with a very competent manager, the carers are very caring. They report issues correctly and follow medical directions well. There is a very good working relationship between the home and the GP Practice. We hold a weekly surgery in the home, the manager and staff are always prepared for this and it works very well”*.

Visiting healthcare professionals told us *“this is a very good service; the carers know the residents and are always very helpful. They are one step ahead for the residents, which is really refreshing. I trust the carers”*. The service is part of the ‘Gwen am Byth’ scheme which provides valuable guidance and training on oral health for vulnerable people.

Care staff interact very kindly with people with a number of them able to communicate in Welsh. People choose when to get up and retire, there are always a range of meal options and bilingual information is readily available.

People and their relatives speak highly about the care and support they or their loved one receives and the care staff. They told us *“the carers are very good to me, everyone is so kind”, “the home provides excellent care and support to my mother and the staff always show patience and respect to her at all times. My mother is very content to be at Awel Tywi”, “I cannot fault the care that my brother gets. He is well looked after, treated with respect and dignity at all times. The staff are so kind and caring not only to [X] but to us his family”*.

People and their relatives feel able to raise concerns and these will be listened to. There are details of Carmarthenshire County Council’s complaints procedure provided to people when they move into the service and displayed in communal areas.

Environment

Generally, people are supported to achieve their personal outcomes. Whilst the décor is a little dated and in need of refurbishment in places, the service is clean, homely and welcoming. Communal lounges and dining areas have been redecorated with a range of furnishings and artworks to compliment the spaces. Peoples bedrooms can be identified with colourful personalised displays on their doors. The bedrooms reflect peoples individual choices and wishes with pictures, photos, ornaments and items of furniture.

Communal bathrooms are clean and welcoming with artwork placed on the wall around the bath. However, some white handrails and toilet furniture do not fully support people living with Dementia or those individuals who have difficulty with their eyesight. Consideration should also be given as to how the decoration, artwork and facilities within Ty Dinefwr, which cares for people living with Dementia better support their needs, preferences and experiences.

The risks to people's health and safety are minimised. All visitors are required to sign in and out of the service. There are a range of maintenance checks and audits undertaken. Testing and servicing of firefighting, moving and handling equipment are completed within the required timescales. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. Communal areas and emergency exits are uncluttered and free from hazards. Substances harmful to health (COSHH) are stored safely. Keypad entry systems are used where considered required. Emergency alarms are accessible for people to use and are responded to in a timely manner. Bilingual signs are displayed within the service.

Communal gardens are well maintained and inviting for people to use. There are a number of seating areas, raised beds and borders which are well stocked with plants and shrubs. The Dementia friendly designed garden offers people the opportunity to enjoy the surroundings safely whilst exploring points of interest including a sensory area and water feature.

Leadership and Management

People can be assured there are thorough governance arrangements in place. The RI is in regular contact with the service and undertakes Regulation 73 visits within the required timescales. CIW have received copies of the reports, which are detailed and demonstrates they speaks to care workers and people living in the service during their visits. Staff and people also confirmed this with us during the inspection visit. There are a range of monitoring tools and audits undertaken. Actions from the audits are acted upon and reviewed regularly.

The manager and deputy manager work very well together and along with senior carers make a strong leadership team. The Manager is very well supported by the RI and he speaks highly of their working relationship. Care workers speak positively about the leadership team and working in the service. They told us *“this is a lovely place to work. [Manager] is really helpful and has supported me through a personal bereavement. [Deputy Manager] is also very approachable and supportive”, [manager] and [deputy manager] are great, they both have an open door policy”, “[senior carer] is absolutely fabulous. She is so caring, supportive, you can go to her for anything.*

Families and visiting health and medical professionals praise the management of the service. They told us *“I feel that the Management at Awel Tywi are very good. They are friendly/approachable and contact me if needed”, “the management team at Awel Tywi have always come across as being professional and caring” and “this is an excellent service with a very competent manager”.*

There are robust recruitment and selection processes in place. The correct clearances and checks are undertaken and documented before staff commence employment in the service. People receive care and support from knowledgeable, suitably trained and a well-supported staff team. Care workers have a very good understanding of the people living in the service and are able to provide details about the individuals. To support them in their roles, care workers receive an array of mandatory and specific training according. They told us *“we have plenty of training, I am an oral health champion”, “I have attended loads of training, it’s all really valuable and helps me”.* The managers and a selection of staff have attended a bespoke six week training course to become Dementia Champions. Staff receive regular documented supervision and an annual appraisal; the staff we spoke to and records we read corroborate this.

There are policies and procedures in place which are reviewed regularly. The Statement of Purpose reflects the service being provided and CIW are appropriately notified of incidents.

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

	inspection	
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