



Inspection Report on

Y Bwthyn

**Y Bwthyn Residential Care Home
Bigyn Road
Llanelli
SA15 1PA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

02/02/2024

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About Y Bwthyn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Carmarthenshire County Council Adults and Children's Services
Registered places	32
Language of the service	Both
Previous Care Inspectorate Wales inspection	18/05/2022
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

People receive the care and support they need. Care workers have a good understanding of people's individual needs and choices. Care records provide a good sense of the individual, reflect their current care needs and involve the person and/or their representative. People praise the care workers and the management of the service.

The manager is supported by the Responsible Individual (RI) and a deputy manager. The RI visits the service regularly and uses these and a range of quality audit tools to ensure they have a good overview of the service.

Y Bwthyn offers people an environment which is welcoming and clean. Internal décor and furnishings are well maintained but communal bathrooms and corridors could be improved to allow people a more enjoyable and homely bathing experience and to better orientate around the service. The communal gardens offer places for people to socialise and enjoy.

Well-being

People have their choices and views recognised. People personalise their bedrooms, choose their meal preferences and get up and retire when it suits them. The individual and /or their representative are involved in the planning and review of their care. Their views are actively sought by the managers during group and individual resident meetings, the RI during 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 safe from the risk of harm and abuse. 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. Care records provide good information about the requirements and preferences of people. The service liaises with health and social care professionals to make sure people remain as healthy as possible.

People feel able to raise concerns about the service should they have the need to do so. There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies.

In the main people are supported to achieve their well-being by the environment. However, the internal decoration in some places does not assist people to orientate around the corridors and bedrooms. Communal bathrooms can be made more homely for people to use and enjoy.

Care and Support

People's individual needs and preferences are recognised and understood. Care workers are knowledgeable about people's personal histories and their specific care needs and daily preferences. The care records we read provide a good sense of the individual, their daily routines and specific care and support needs. Health and medical professionals are involved in the care and support of people when required and this is well documented in care records. Accompanying risk assessments are also being regularly reviewed. There is good evidence of the person and/or their representatives being involved in their care planning and reviews.

Regular resident meetings are held to inform and seek feedback from people. These meetings are well documented. People get up and retire when they choose, there are a range of meal options available which can be eaten in the communal dining room or in their bedroom. People told us after they had eaten their lunch *"the food is marvellous; I wouldn't change a thing"* and *"there are always different choices"*. A relative told us how the service had arranged a private Christmas lunch for him and his wife to enjoy time together *"this was a lovely thought and greatly appreciated"*.

Care staff interact kindly with people. A number of staff speak to people in Welsh as this is their preferred language. Activities play a part in people's routines. Individuals are supported and encouraged to participate in a range of activities and events. Information notices in communal display cases provide details of forthcoming events and entertainment.

People we talked with told us they feel safe living in Y Bwthyn and are able to raise concerns if they need to. We were told, *"I have no complaints. I would speak to [manager] if I did have"* and *"I know I can speak to one of the carers or the manager if I need to"*. A relative told us he feels his loved one is very well cared for and safe and feels *"confident"* the manager would deal with any concerns they have. There are details of Carmarthenshire County Council's complaints procedure provided to people when they move into the service which is also displayed in communal areas.

Environment

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. Emergency alarms are accessible for people to use and are responded to in a timely manner. The service is clean with no malodours.

In the main people are supported to achieve their personal outcomes. Bedroom corridors are pleasantly decorated with pictures in some areas. However, additional thought should be given about the decoration and the use of bilingual signage in the service to better support people orientate to their bedrooms and around the communal areas.

Some work has been undertaken to make the communal bathrooms more welcoming for people to use and enjoy their bathing experience. This includes a radio being readily available should a person choose to listen to it whilst bathing. However, thought should be given how bathrooms and toilets can be further improved upon including the number of notices being displayed which makes them look clinical rather than homely.

Bedrooms are personalised with items and furniture, pictures, and ornaments according to individual preferences. Each bedroom door has a picture of the person and an image of an interest particular to them.

Each of the four units that make up the service have their own communal lounges and dining areas. All are well decorated with colour coordinated chairs and curtains. There is a pleasantly decorated tearoom which has access to the communal gardens. There are plans in place to increase the use of the tearoom and the facilities it offers to people and their visitors.

Communal gardens are available for people to use and provide people with a safe area to walk and enjoy. There is a gazebo and plenty of seating along with numerous raised beds for people to enjoy.

Leadership and Management

People can be assured there are thorough governance arrangements in place. The RI is in regular contact with the service and has undertaken Regulation 73 visits. CIW have received copies of the reports, which demonstrates they speak to people and staff as part of the visits to the service. Staff and people confirmed this with us. There are a range of monitoring tools and audits undertaken. Actions from the audits are acted upon and reviewed regularly. There are good recruitment and selection processes in place. The correct clearances and checks are undertaken and documented before staff commence employment.

People are cared for by knowledgeable, well trained and a supported staff team. Care workers know about the people they support, their care preferences and needs. Staff receive a range of training and this is corroborated by the training matrix and feedback from staff. Dementia Care Champions training is readily available for a number of team members and this has enhanced care workers understanding of supporting people living with Dementia. One care worker told us *"I never knew about the Delerium chart before. It has given me a new insight into caring for people with Dementia"*.

Care workers receive regular documented supervision and an annual appraisal. The manager and deputy are well respected by care workers who told us *"[manager] tries to be there for all of us, she always listens to you and her door is always open"* and *"this is a good place to work, the manager and deputy are very approachable"*

Care workers show a good understanding about their responsibility to protect the people living in the service and to report any concerns. Staff move and handle people safely, and their individual needs considered.

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. 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
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