



Inspection Report on

Bodelwyddan Residential Care Limited

**Ffordd Belan
Rhosneigr
LL64 5JG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

20/01/2025

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About Bodelwyddan Residential Care Limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bodelwyddan Residential Care Ltd.
Registered places	16
Language of the service	Both
Previous Care Inspectorate Wales inspection	5 October 2023
Does this service promote Welsh language and culture?	This service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meet the Welsh language and cultural needs of people who use the service.

Summary

The Responsible Individual (RI) visits the service almost daily so has a good oversight of the service. They regularly check records, inspect the environment and talk to residents and relatives to check they are happy with the service. Each person's needs are assessed prior to coming into the home to ensure they are compatible with others and that the service can meet their needs. Personal plans are designed to meet their needs and manage risks, and these are kept under review, however, the quality of the information recorded is not consistent across all plans and this is an area for improvement. People enjoy living here and feel it is homely and friendly, offering companionship and support whenever it is needed. They have choice about their daily routines, activities and meals. Staff are trained to provide the right support and are carefully vetted as part of the recruitment procedure. Staff feel supported and valued and enjoy their work. The environment is safe, clean, warm and welcoming. The RI invests in the building, decorating and changing fixtures and fittings when required, and routine health and safety checks are completed to keep the home safe.

Well-being

People have control over their day-to-day life. They are listened to and involved in making choices and decisions that affect them. They choose their meals, their routines and how and where they spend their time. They speak in their language of choice as staff are fluent in Welsh. The RI visits most days and speaks with people about their well-being; the manager and staff are approachable and provide an environment in which people feel free to express their views and make suggestions.

People are supported with their physical, mental health and emotional well-being. Staff are attentive, polite, and respectful to people and we saw many positive interactions. People's well-being is checked throughout the day with genuine warmth and care from care staff. Most, but not all, personal plans contain enough information for staff to know the care people need and what they like and dislike. This is an area of the service which requires improvement.

People are protected from potential harm, abuse, or neglect as staff are trained in safeguarding and policies and procedures keep people safe. The manager and RI base themselves in the home so they can be seen by everyone and are very accessible to residents, relatives and staff. Care staff and people living in the home feel they are very approachable. Staff are safely recruited to ensure suitability, and they are trained in important areas of care. The RI does spot checks, turning up at the home when they are not expected to ensure the staff are carrying out their roles according to expectations.

Visitors are welcome and meetings between people living in the home and their relatives are accommodated through a variety of means including virtual meetings on handheld devices. There is a quiet lounge in which people can chat with their guests. Children from local schools and occasionally entertainers come to visit. Care staff enjoy taking people out for walks when they have the time so people can maintain their links with the community.

People live in accommodation which suits their needs and in which they feel at home. People have their own things around them in their rooms and can choose from various spaces to sit and spend their time. The first floor is accessible via a stair lift and there is bathroom on each floor. The home is clean, comfortable and homely and suits the needs of people living here.

Care and Support

People have documented personal plans for how their needs are to be met, but these are not always completed comprehensively. We saw preadmission assessments provide sufficient information to ascertain whether the service can meet the person's needs. Plans and risk assessments are kept up to date through under regular review, but we saw the completion and quality of personal plans is inconsistent. In some, tasks are broken down to inform care staff of how the person is to be assisted, but others lack detail. Some, but not all plans are explicit about people's desired outcomes; one said '*to ensure X is included and feels part of the home*' but other plans do not record any outcome. One personal plan was not completed; it did not provide information on the person's nutrition needs, likes or dislikes or their continence needs. Some recorded needs lack detail, so care staff cannot always know from the plan where assistance is needed and what the person can do for themselves. Every person should have a complete personal plan which identifies what care is required to meet their needs and achieve their outcomes. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People are provided with the quality of care and support they need. People told us they wanted for nothing and had all their needs met. One person was pleased with the promptness of care '*whenever I need it*', and the companionship the service provides. People complimented the food and the choices they have; a four three weekly menu evidences a range of nutritious home cooked meals. They like that they can follow their daily routines at their own pace, choosing when to go to bed and get up. One person likes to have a shower every morning and is supported to do this. People engage in activities when they are arranged, they have their nails painted and partake in arts and crafts and games.

People maintain their access to health and other services. The service has a good relationship with the local GP who visits the home if anyone is unwell. The service acts promptly when someone is ill. A person told us they felt unwell, and that they had told staff. We found the GP had been called straight away. Daily records are kept of communications from health professionals and of care provided. Any changes are communicated to the care staff, so they know how to meet people's needs. Records show appointments attended such as with opticians, dentist and chiropodist. The service has safe systems in place for medication management. A pharmacy audit has been completed and additional measures taken to help ensure medication practices stay safe.

Environment

People live in a home that meets their needs and promotes their well-being. The home is clean and comfortable, and people feel at home here. Bedrooms are personalised with things that are important to the person, photographs and pictures hang on walls and books and hobby materials sit on their cupboards. People can watch television in their rooms or listen to their radios. We met people who said they enjoyed looking out of their window and watching what is going on outside. They feel comfortable in their room but know they can socialise with others in the lounge if they wish. The dining room is welcoming with tables nicely set for mealtimes. Bathrooms are modern and bright, with fully adjustable baths and a rain fall shower. There are adequate toilets. Three communal rooms are available, so people have a choice of where they spend their day. People enjoy sitting in the garden when the weather permits.

The home is secure, and visitors must ring the doorbell for attention and sign in and out of the building. Our identity was checked before entering the property. We viewed the home's health and safety records and saw safety checks are completed by external contractors and routinely by staff. We saw certificates confirming checks on gas safety and the condition of electrical installation. Electrical appliances tests, tests on mobility equipment and on water quality have been carried out. The RI checks the building throughout at least every three months for areas that need attention, repair or renewal and staff also record issues in a log kept for the maintenance person. A new sink, carpets and curtains have been fitted in one bedroom recently. Records showed matters identified for repair are addressed quickly.

Leadership and Management

There are arrangements in place that ensure the RI has good oversight of the service. They are present most days and situate themselves so they can always be seen. The RI completes a report of their visit every three months, and these show residents are spoken with, the environment is inspected, discussions take place with staff including the chef, and meals are reviewed; records such as medication administration charts are checked for completion and accuracy. A biannual report should be completed that assesses the quality of care in the service and the manager confirms they are taking on this responsibility. The service will resume issuing questionnaires to people, their relatives, the staff and visiting professionals to seek their views on the service, identify what is working well and where improvements might be made. The manager is registered with Social Care Wales and is working towards the required qualification. They are supported by the RI. People's views are sought on aspects of the service daily, and there is a suggestion box for people to post their ideas. Staff told us they are listened to and feel valued, and staff meeting minutes show information is shared and views are sought.

People are supported by appropriate numbers of staff who are suitably fit and have the knowledge and qualifications to provide the levels of care and support required. Staff files show effective recruitment procedures. Staff are vetted for suitability and then inducted to ensure a good understanding of how the service operates. Records show training in a range of relevant topics is mandatory and care staff confirmed they receive plenty of training.

Care staff told us they receive good management support through one-to-one supervision and day to day informal support. They feel listened to, their personal circumstances respected and considered when arranging rotas. Staff told us the best thing about working here is the people they care for; they enjoy their work and consider the home to be like a family. They feel competent to do their work. We saw policies and procedures are in place to ensure staff know about whistleblowing and everyone can be confident any complaints will be taken seriously and investigated.

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	
15	We found personal plans were not always in place to record what support people require to meet their needs and to achieve their outcomes.	Not Achieved
59	Records of how care and support is delivered are not made daily. Records should be available to reflect the care and support people have received. This includes fully completing charts used to record the support people receive to care for their skin.	Achieved

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