



## Inspection Report on

**Cilymaenllwyd care home**

**Cilymaenllwyd Care Home  
Pwll  
Llanelli  
SA15 4RB**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

29/11/2022

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## About Cilymaenllwyd care home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Barleybind Ltd
Registered places	49
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">[Manual Insert] 15<sup>th</sup> March 2021</a>
Does this service provide the Welsh Language active offer?	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

People living and working at Cilymaenllwyd are happy and there is a positive atmosphere that puts people at ease. People are treated with dignity and respect. Care documentation is detailed and up to date with reviews being undertaken at least every three months.

Care staff feel supported by management and open communication is encouraged. Staff and people living at the service are given opportunities to share ideas and contribute through regular meetings and questionnaires. Quality assurance processes are in place and the RI and the team strive to work towards improvements to the service provision. The Responsible Individual (RI) has not been able to visit in person during the pandemic but hopes to make regular quarterly visits again from January 2023 onwards.

## Well-being

We saw staff interacting with people in a friendly and happy environment. Care staff have a good rapport with those they care for and people enjoy the light-hearted banter between them. People are happy and content and clearly enjoy each other's company. One person told us *"We always have fun here, it's lovely here"*.

People are valued as individuals and their wellbeing is promoted. Personal information is gathered from people and their representatives on admission, including their likes and dislikes and individual preferences. Staff will also regularly seek people's wishes on what they would like to achieve through questionnaires, residents' meetings, and individual care plan reviews. A singer was at the service on the day of the inspection and interacted with people on a group and individual basis. A family member said, *"Music plays a big part, mum is unable to do crafts"*.

People are encouraged to do what matters to them. We saw one person accompanying the handyman to purchase some items he required for his job and were informed that the person regularly enjoys spending time with the handyman going on errands.

A choice of meals is provided and the kitchen staff are aware of individual's preferences and can cater for this. The chef is happy to make something that is not on the menu if requested by an individual. Cakes are also made to celebrate special occasions such as a birthday.

There is a choice of communal areas where people can relax and spend time and in the warmer weather there is a suitable outdoor area with views of the Gower. Some people choose to spend time in their room. A relative told us, *"Sometimes I'm reluctant to leave when I visit, it's so friendly and cosy there, I would happily have a room there for a couple of weeks it's so nice!"*

Safety is promoted, care staff are aware of the safeguarding policy and procedure to follow if they had any concerns and are confident that management would take appropriate action. The home is secure, visitors are required to ring the bell to enter the home and a signing in book is used. We saw care staff providing reassurance to people and assisting those with mobility and sensory issues to safely move around the home.

## Care and Support

People are cared for by staff who are enthusiastic and motivated and who know people well. Assessments are undertaken prior to people moving to the service to ensure their needs can be met. Up to date and accurate care plans inform care staff on individual care and support needs and risk assessments promote people's safety and wellbeing.

Individual care plans are reviewed regularly with people and although representatives are not formally invited to reviews, family members we spoke with told us they are always updated straight away of any changes to care needs and that there is good communication. One relative told us, *"I'm always contacted if a GP is called or anything like that"*. Another relative said, *"They (staff) are always happy to give an update"*

There are meetings held once a month for people living at the service and minutes demonstrate that people are happy to give their views on all aspects of the service. Relatives' meetings are usually also held however these have not been held during the pandemic but are due to recommence in January 2023.

A multi-disciplinary approach is used, and records show that health and social care professionals such as District Nurses, Physiotherapists, Occupational Therapists and Dietician are involved in care management. During the inspection an Optician was visiting to undertake eye tests. All falls are recorded, and audits are undertaken monthly to help identify patterns and concerns, referrals are made to the Falls and Frailty team as and when required.

People and their representatives told us they are happy with the care that is being provided and comments included, *"I have absolutely no concerns"*, *"This place was head and shoulders above the rest when we were looking and I can't imagine any other place being any better"*. One person said, *"It's outstanding, I tell my family I arrived in heaven when I came here"*

## Environment

Cilymanllwyd is a large manor house set in its own grounds with views over the estuary. It is well maintained with any repairs undertaken by the handy man or a tradesperson when required. Audits and Service certificates show that the required safety checks are done in line with legislation and the building, equipment and outside area are well maintained. Any issues that arise are dealt with promptly. People enjoy opportunities to sit in the lounge watching the wildlife through the large windows looking onto the gardens.

Inside is warm, clean and homely. Some areas have recently been redecorated and this is ongoing. Pictures and signage had been removed from the walls during the Covid outbreak as directed by the Infection Prevention and Control Health advisor and whilst most have now been put back up this is also ongoing. Bedrooms are personalised and people are encouraged to have their own items such as photos and ornaments around them. The kitchen has been awarded the maximum rating of five by the Food Standards Agency. It is clean and well equipped.

The flooring in one area of the home has recently been changed from a patterned design to plain to make it safer and signs around the home assist those with memory issues.

The garden area and home are secure, and visitors are required to ring the front doorbell to gain access. All visitors are required to use the signing in book. For safety a keypad is used for accessing the staircase.

As Covid restrictions have now been relaxed visitors are not asked to show a negative test result, however, are encouraged not to visit should they be experiencing any symptoms.

People have personal emergency evacuation plans (PEEPs), specific to their individual support needs. For example, mobility and awareness of safety.

## Leadership and Management

The RI keeps regular contact with the home, providing good support to the manager. Although the RI has good oversight of the service, and is in regular contact with the manager, the regulatory quarterly visits have not been undertaken during the Pandemic. The RI plans to visit in January 2023 and reassures us that this will again be routinely every three months. This will be followed up at the next inspection.

A recent thorough Quality Care review report evidenced that systems are in place to monitor, review and improve the care and support that is being provided and we saw questionnaires that had been completed by people using and working at the service.

The manager is supported well by the RI and several staff members told us that the RI is always contactable by telephone or email. One staff member said, *“I can raise anything and I would get a response”*. People know how to make a complaint if they need to and are confident the management team would listen to them if they did. The manager is very present within the home and knows the staff and people living at the service well. One staff member said, *“They (the Manager) will help us if we are short staffed – will help with meals and things”*.

Care staff are happy and feel supported by both the manager and the RI. Care staff we spoke with have a high regard for the manager, one person told us, *“X (manager) is a lovely manager, she is very good. We are like one family here.”* Another staff member described the manager as, *“Helpful, supportive and always smiling!”*. A person using the service told us, *“They’re happy and kind – the people (staff) we deal with”*.

A robust recruitment system is in place and stringent checks are made with the Disclosure and Barring Service (DBS) prior to commencement of employment and references are obtained. Records show that staff are up to date with training, quarterly individual supervision sessions and yearly Appraisals.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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**Date Published** 18/01/2023