



## Inspection Report on

**The Bay Nursing Home**

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

**Date Inspection Completed**

**15 July 2022**

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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	
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service.

### Summary

The quality of the care given at The Bay Nursing Home is of a good standard. There are opportunities for people to socialise with one another and participate in different activities. People living in the home are happy and content. People are well presented and appear relaxed and content. We found staff support people with warmth and in a person-centred manner.

There are effective systems in place to oversee and improve the service which enable the health and safety of residents to be protected. Pre-admission assessments are completed to ensure the service can meet the needs of people before they move in. Staff receive training and regular supervision. There is sufficient staff on duty to meet the needs of people.

## Well-being

People experience warmth and respect. We saw staff treated each person as an individual. They are very attentive and responded to people's different needs with appropriate prompting and support. We spoke with people living in the home, who told us they liked living there. People told us all staff were good and none had any complaints. It was clear that staff knew the people living in the home well and we saw them actively engaging in conversations. People looked relaxed and comfortable in the presence of staff. Staff conversed in a friendly, caring, and respectful way and people responded positively.

People are, as far as possible, safe and protected from harm and neglect. We saw records of appropriate applications under the Deprivation of Liberty Safeguarding procedures. This means that where people needed to be protected from having free access to all areas or the outside of the home their rights were protected. We also saw if any issues of concern were raised these were reported to the local Safeguarding team for consideration. We looked at the staff training matrix and saw staff received training and updates about Safeguarding. Staff are aware of the safeguarding procedures and how to report any concerns. Information on the CIW database demonstrates reportable incidents are appropriately reported within the correct timescale. People told us staff provide them with good care, and they feel safe living at the home.

People live in an environment which is clean and maintained. Refurbishment is planned and ongoing, and it is intended that further attention will be given to include aspects around the environment during the upcoming months. There is a secure patio area to the rear of the building, used by people in the warmer weather. Bedrooms are decorated to the preference of the individual and personalised with items of importance to them.

## Care and Support

People are treated with kindness and compassion in their day-to-day care. The atmosphere throughout our visit was relaxed and calm, yet professional. We saw staff are located in all areas of the home which enabled them to respond to people's needs and requests calmly and quickly. We saw kind respectful interactions between staff and the people they were supporting and heard people laughing and enjoying humorous exchanges with staff. People spoke highly about the staff who support them, they also said they had no concerns or complaints. One person said they had had only meant to come for a short period but decided to stay permanently due to the excellent care they receive. Staff we spoke with demonstrated that they regarded people with respect and know the people they care for.

People are supported by staff, who understand them and their health and care needs. Pre-admission assessments are completed prior to the person moving into the service to determine if their needs can be met. Detailed personal plans and risk assessment are then implemented. Staff told us about the people they cared for, medical conditions they had and the social history of the person. A new electronic care system has been introduced in which the care records provide specific information about the person that includes historical information. We noted personal plans provide good details of the person's needs and how these were met along with associated risk assessments. They are reviewed within the required timescales. We saw people's nutritional needs are considered and their food and drink preferences identified within care records. People's weight is monitored monthly or more frequently dependant on their needs and referrals made to medical or specialist services when required.

## Environment

People feel valued because they are cared for in a comfortable, clean, homely and personalised environment. We saw people's rooms are personalised with photographs and items which are important to them. Two separate communal areas are used where people can socialise and meet with visitors. A dining room is also attached to one communal area which people can use if they wish to. People are relaxed and content and have choice about where they spend their time. People enjoy watching and spoke fondly about the two budgies in one lounge. The home is welcoming, homely and tidy, however the carpet in the main corridor and stairs requires cleaning. The provider is aware and has arranged for this to be deep cleaned. A general maintenance programme is in place for the upcoming months. The home has been awarded a 5 rating (very good) by the Food Standards Agency which was the highest score available from the Environmental Health agency in March 2022.

## Leadership and Management

There is an overall drive for continuous improvement within the home. We saw a number of systems designed to monitor the quality of support people receive. We saw monthly audits are completed in regard to, kitchen audit, care plans and the dining experience. The Responsible Individual completes monitoring visits which includes inspection of various records in the service such as the premises, observations of care being delivered, and discussions with people who use the service, and staff. A quality assurance report is produced every six months and the next report is due. Both reports are detailed, and an analysis of their findings is completed.

There are suitable procedures in place for supporting, developing staff and training. We saw there was training and support programmes in place. Staff told us that they had undertaken a lot of training recently and felt they were suitably skilled to fulfil their roles. The staff we spoke with stated they felt fully supported by the management. Staff supervisions take place every three months. The manager regularly provides hands on care and knows the people who use the service very well. This also provides an opportunity to observe the care provided by care staff.

People can be confident that there is a sufficient level of staffing and stability provided by an experienced manager with a visible presence. We saw the staff rota which was completed in a timely manner. During our visit we saw that there were enough staff on duty to provide people with the support they needed when they needed it. The manager provided effective day to day management of the home. We saw interactions between the manager, residents and staff were relaxed and friendly but professional. We saw residents and staff felt able to approach the manager with ease. People and staff, we spoke with all spoke highly of the manager stating they were approachable and helpful.

The service provider has oversight of financial arrangements and invests in the service. The provider has not declared any financial concerns. The provider has recently replaced the boiler and has forwarded a summer plan which includes work on the roof, heating system, the corridors and gradual replacements of the carpets and furniture. We saw staff rotas reflect there are sufficient staff on duty to meet the needs of people.

### 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** 11/08/2022