



Inspection Report on

The Bay Nursing Home

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

Date Inspection Completed

16/10/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

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	15/7/2022
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

The quality of the care and support provided at The Bay is good. There are clear lines of accountability and leadership providing assurances that the service is safe, well run and complies with regulations. Staff feel supported in their roles and have access to regular training, learning and development to enable them to fulfil the requirements of their role, and meet the needs of individuals using the service.

People experience enhanced well-being, because their needs are understood and anticipated by a dedicated staff team, who treat them with dignity and respect. Teamwork is evident and the provision of care and support respects people's individuality and abilities. Personal plans demonstrate staff understanding of the individual and are detailed and personalised. Reviews are undertaken regularly to ensure changing needs are understood and addressed. Relationships between staff and people living in the service are warm, caring, and relaxed. A variety of group and individual activities are offered each day to enrich people's lives. People are encouraged by staff to participate in meaningful activities. Health needs are monitored and input from other professionals is requested as and when needed.

Well-being

People have control over their day-to-day life. People are complimentary about staff who know people well, treat them with dignity and respect and offer support discreetly and sensitively. Staff use different approaches to reassure, encourage and interact with people in a positive way. People are very well cared for, and attention had been paid to personal appearance. We saw on a number of occasions staff offering choices in what people wanted to eat, what they wanted to drink and where they wished to spend their day. People receive a service through the medium of Welsh.

People's physical, mental health and emotional wellbeing needs are being met. Personal plans are detailed and provide good, clear information regarding individual's needs and the way care should be provided. Their health needs are monitored, and referrals are made to other health professionals when needs change. Staff spend time with people engaging with them in activities, games, or discussions. People have appropriate, healthy and nutritious meals and drinks.

People live in accommodation which promotes their independence and is safe. The provider has an ongoing maintenance programme; new flooring is currently being laid and adaptations are provided to enhance people's independence. The home is clean, warm, and comfortable and bedrooms reflect individuality. Maintenance checks are undertaken to ensure that people are safe. The Environmental Health department has awarded the service a level 5 food hygiene rating (the top rating) in February 2023.

People are safe and protected from abuse, harm and neglect. Staff receive training in safeguarding, there is a safeguarding policy in place and staff are aware of their responsibilities regarding this. People told us that they felt confident raising concerns but had no issues. In addition, each person has regular reviews with health care professionals, not employed by the service, which provides them with further opportunities to raise any issues they may have around their care and support. Deprivation of Liberty Safeguards (DoLS) applications are made to the local authority. An advocate is available, and their details are displayed in the main corridor of the home. Staff are vetted, trained and have regular supervisions.

The 'Active Offer' of the Welsh language is provided. We heard staff speaking both Welsh and English to people. Arrangements are in hand to provide bilingual documents for people.

Care and Support

People living in the home experience appropriate, responsive care from staff who have an up-to-date understanding of their needs and preferences. Pre-admission documentation prior to people moving into the home is completed to ensure the service is suitable to meet the individuals care and support needs. Personal plans are written in a way that respects the person's individuality and a person-centred approach to the delivery of care.

Documentation is detailed and provides good, clear information regarding individual's needs and the way care should be provided and reviewed monthly or when any needs change. A one-page profile is completed, which contains important information about people's preferences, likes and dislikes, hobbies, and routines. There are effective systems in place for the safe storage and administration of medication.

People are supported with their physical, mental health, emotional and social well-being. People's dietary, hydration and pressure care needs are closely monitored and referrals to health and social care professionals are made when necessary. The service has enrolled in the 'Gwen am Byth' programme which promotes good oral health and provides training for all staff. Some people have recently been reviewed by a chiropodist, and referrals are made to the tissue viability team and physiotherapist in a timely manner.

People in the home have opportunities to be positively occupied and stimulated. There is a variety of group and one-to-one activities available within the home and in the wider community, which enables people to be involved in activities that matter to them. The activity champion organises events such as musical bands, visits from local school children and other entertainers have visited. Spiritual needs are acknowledged and supported, and a Pastor visits every month or more frequently if requested. People recently celebrated the Nepalis New Year, enjoyed a fish and chips day, BBQ's, themed nights and ice cream on the beach when the weather was nice.

The service promotes hygienic practices and manages risk of infection. Staff have received training in infection control and there are good hygiene practices throughout the home. Care staff can refer to infection management policies when necessary.

Environment

People live in an environment which promotes their independence, is clean, safe and well maintained. There are pleasant outdoor spaces for people to relax, enjoy and either spend time together or have time alone. People can bring their personal belongings with them, and each bedroom viewed contained various items which were personal to the individual such as ornaments, furniture, and photographs. Cleaning schedules are in place which staff check on, all areas we saw were clean and fresh. Investment in replacing the flooring is underway and the dining room and communal lounge are currently having new flooring laid. Corridors are spacious, and free from clutter enabling people to move around freely and safely. Bi-lingual signage and information is displayed around the home.

Effective systems are in place to ensure people living in the home, the staff and visitors are kept safe. All external doors are secure to prevent unauthorised access to the building. A visitor's book is available in the entrance area to ensure records are kept of all visitors entering the building. Testing and servicing of appliances is kept up to date including the hoists, slings and portable electrical appliances. Gas and electricity safety testing is up to date and all equipment is serviced regularly. Housekeeping and laundry staff tell us they have access to a good supply of cleaning equipment. We looked at records which evidenced there are systems in place for checking and maintaining fire safety. Personal emergency evacuation plans for all residents are in place and records confirmed fire drills and testing of fire equipment are carried out within recommended timescales. Staff receive regular fire training, and the fire procedure was clearly displayed for information.

Leadership and Management

People can be confident that the home operates effectively due to the structures in place. The provider is committed to providing a good service and audits practices in the home to ensure that the service operates appropriately. The responsible individual (RI) visits the service regularly and produces a report of their visit. Discussions with people using the service and staff are carried out, information received from people living in the service is positive. The manager has an open-door policy and provides hands on care which gives a clear sense of direction to staff and ensures the running of the home is open and transparent. Management and staff work hard to develop relationships with people using the service, their relatives and visiting professionals, this is achieved by open lines of communication. This openness was observed, relatives visiting are welcomed, comfortable and relaxed, there was a homely feel to the home. People living in the service spoken with stated that they had no complaints but, if they had, they felt confident to voice them.

People can be reassured that checks of staff are carried out before they begin working at the service and can enjoy being cared for by a motivated and valued staff team. Staff files contain all the relevant safety checks prior to commencing their role and an in-depth induction is carried out. Disclosure and Barring Service checks (DBS) are carried out before the person is employed. All staff are registered with Social Care Wales. Staff views are listened to at meetings and supervision. Trained nurses and care staff work alongside each other which encourages effective teamwork and provide opportunities for supervision of practice. One to one supervision sessions are also held.

People can feel confident in the care they receive because staff are competent in meeting their needs. Training records seen show all staff have received statutory training in subjects such as manual handling (practical and theoretical) first aid, food safety and hygiene, infection control, health and safety, safeguarding vulnerable adults, fire safety. Additional training, specific to the needs of people living in the service included Deprivation of liberty Safeguards (DoLS), epilepsy, falls awareness, tissue viability, nutrition and well-being, oral health, diabetes, and medicine management.

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
-----	--	-----

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 14/11/2023