



# Inspection Report on

**Llys Fechan Care Home**

**Cartref Llys Fechan  
48 Carmarthen Road  
Cross Hands  
Llanelli  
SA14 6SU**

**Date Inspection Completed**

26/01/2023

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## About Llys Fechan Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Neuadd fach Limited
Registered places	18
Language of the service	English
Previous Care Inspectorate Wales inspection	20/12/2021
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

The service is under new ownership since the last inspection. The new Responsible Individual (RI) uses their Regulation 73 visits and quality audit tools to ensure they have a good overview of the service. The experienced and respected manager leads a committed staff team who are valued by people living in the service, their relatives and visiting professionals.

The health and wellbeing of individuals is important to those working in the service. People and their relatives corroborate this. Care records provide a sense of the person and people and / or their representatives are involved in their care when able to. Care workers are well trained and knowledgeable about the people living in the service.

The environment is clean and generally well maintained, but repairs to the tiling in a communal bathroom and better access to electric points are required. There are appropriate infection prevention and control measures in place in line with current Public Health Wales guidance.

## Well-being

People are protected 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 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.

There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff respect the manager who in turn is well supported by the RI. Care staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies. Appropriate infection prevention and control measures are in place and staff are clear about their role and responsibilities. The service is clean, well maintained albeit some work is required in a communal bathroom.

People's choices and views are recognised. The RI seeks the views of individuals living and those working in the service during Regulation 73 visits. People can personalise their bedrooms, are able to choose their meal preferences and can get up and retire when it suits them. The environment offers homely and comfortable communal areas for individuals to meet together and with their visitors.

## Care and Support

People feel they receive the care they need and compliment the staff, they told us, *"Its my home, the care is on another level"* and *"I am very happy, no complaints – everyone is great"*. A relative spoke highly of the service and their comments include, *"My father is being very well looked after, has everything he needs. The carers and manager are fabulous! I know he is safe here; the food is excellent. I can raise any issues with the manager, and they will be addressed"*. A visiting health professional told us *"I have no issues with the service, the staff are very kind and follow any clinical instructions requested of them. There is also good communication with the manager"*.

People can participate in regular group and individual activities. During this inspection people were seen playing bingo in one of the communal sitting rooms. All were seen to be enjoying the game and staff make ensure all those attending are supported to get the best out of the activity.

Care staff have a good understanding of the needs of the people living in the service. They know about individual's histories and their specific care needs and daily preferences. Interactions between staff and people are kind and caring. Care workers enjoy supporting individuals and working in the service. They told us; *"I love it here, we are like a family, the team are good as is [manager]"* and *"it's a pleasure to come to work here. I can't think of a better place to work"* and *"we are one big family"*.

All the people we spoke with tell us they feel safe living in Llys Fechan and can raise a concern if they need to. One person told us; *"I suppose I'd speak to one of the girls [care workers] if I had a concern"* and *"I don't have any concerns but would speak to [manager] if I did"*. There is a clear complaints procedure included in the information given to people and / or their relatives on moving into the service. Notices in communal areas also explain how to make a complaint. We did note emergency alarms are not always hanging freely so people may not be able to summon help in an emergency, this was raised with the manager and RI at the time of the inspection.

Care and support plans have good details and give a sense of the individual. Where possible, people and or their representatives, sign their care plans to demonstrate they are involved in their care. Health and social care professionals are involved with people's needs. A number of the staff team are able to communicate in Welsh, which we observed during the inspection.

The kitchen has a five star food hygiene rating with varied menus offering daily choices. People told us *"the food is excellent"* and *"the choices of meals is great, lots of home cooked food"*. Menus are updated according to the season and in consultation with people. Meal times appear to be a very positive and an enjoyable social event. Meals are well presented, and choices readily available.

## Environment

There are a range of maintenance checks undertaken to minimise risks to people's health and safety. 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. We noted repairs to the tiling in a communal bathroom is required. This has already been identified by the manager and RI and will be addressed.

Infection prevention and control measures are in place. There are sanitation and PPE stations located in the service. There are appropriate and safe measures to facilitate relatives and friends to visit. This is being kept under review. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. Domestic staff have the appropriate equipment to carry out their tasks safely. The environment is clean and free from malodours.

Furniture and fixtures are well maintained. People's bedrooms are personalised with items of furniture, pictures, photographs and items important to the individual. There are communal lounges for people to socialise. These feel homely with ornaments, pictures and points of interest and comfortable chairs for people to relax in.

Whilst there is a hairdressing room in the service, insufficient electric sockets mean people sometimes have to have their hair dried in the communal hallway. Additional sockets are being explored by the manager and RI to help people have a more enjoyable experience when having their hair done.

## Leadership and Management

There are governance arrangements in place. The RI is in regular contact with the service and has undertaken Regulation 73 visits and has carried out audits of the service since taking over the role. 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. The manager is receiving regular supervision and support from the RI and feels well supported by her.

Staff are competent, knowledgeable and supported to care for the people living in the service. They attend a range of mandatory and service specific training and records confirm this. Care workers told us about the training they attend and demonstrate a good understanding of their role in the protection of individuals and safe moving and handling practices. Staff records show they receive an effective induction, have regular supervision and an annual appraisal. Care workers told us *“we’ve had a lot of on-line training during the Pandemic, but it has helped to remember things”, “I have regular supervision with [manager]”*.

People, their relatives and visiting professionals praise the staff and manager and comments include; *“I have no issues with the service, care or management”, “this is a lovely home where the residents are well looked after”*. Staff compliment the manager and working in the service. They told us; *“[manager] is great, very approachable”* and *“I know I can speak to [manager] if I have any concerns, she cares about all the residents and staff”*. Staff interact and support people in a caring and respectful manner, which adds to the welcoming and happy atmosphere in the service.

Staff follow appropriate infection prevention and control measures and are able to explain their responsibilities in reducing the spread of COVID-19. There are up to date and regularly reviewed policies and procedures in place to support staff.

### 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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