



# Inspection Report on

**Hafan y Coed Care Home**

**Nightingale Court  
Llanelli  
SA15 1HU**

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

**This report is also available in Welsh**

**Date Inspection Completed**

21/12/2022

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## About Hafan y Coed Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	107
Language of the service	English
Previous Care Inspectorate Wales inspection	16/06/2021
Does this service provide the Welsh Language active offer?	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

People's individual health and wellbeing needs are understood by care workers who are knowledgeable, trained and well supported. People and / or their representatives feel they are safe living in Hafan y Coed. In the main care records provide a good sense of the person and help staff to carry out their roles.

The service is led by a dedicated general manager and a management team who support each other. They are respected by staff, people living in Hafan y Coed, their relatives and visiting professionals. The Responsible Individual (RI) uses their Regulation 73 visits and a range of quality audit tools to ensure they have good oversight of the service.

The environment is well maintained and helps give people a sense of community and to live as independently as they can be.

## 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 respond to emergency situations and when people are distressed in a timely and kind way. They have a good understanding of people's needs and how best to meet these. In the main care records provide information about the requirements and preferences of people. There is good evidence of the service liaising with health and social care professionals to make sure people remain as healthy as possible.

There are robust recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff respect the general manager and management team who in turn are supported by senior managers and 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 and well maintained and tailored to people's needs.

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 are involved in their care when able to.

## Care and Support

People living in the service are cared by staff who have a good understanding of their needs. Care workers told us about people's specific care needs and daily preferences, and these are reflected in their care records. Interactions between staff and people are kind and caring. Care workers enjoy supporting individuals and working in the service. They told us; *"it's so important our residents have the best life possible"* and *"the residents mean everything to me, it's why I'm here"*. We saw care staff responding to an emergency situation and to a person who was distressed in a very kind, caring and professional manner.

People and their relatives receive the care they need and compliment the staff. They told us; *"this is not a home, it's my mother's home". I know she is safe here; everyone one is like my extended family*" and *"everyone is very kind to me; they know how to care"*. They also tell us Hafan y Coed is a safe place for their loved on to live in; *"I know my wife is safe living here, and that is so reassuring to me"* and *"I like that they look at different ways to support my husband rather than looking to increase his medication – it is very reassuring"*.

People and/or their representatives can raise a concern if they need to *"I know [general manager] and [deputy] are always available if I have any concerns. I have every confidence they would deal with any concern I have"*. There is a clear complaints procedure included in the information given to people and / or their relatives on moving into the service.

Care and support plans have good details and give a sense of the individual, however, details of individual interests or activities they like to be involved in should be better recorded. This has been discussed with the general manager during the inspection. 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 and this is well documented. Some staff can 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 meals are very tasty with options available if I want something different"*. We saw people's personal meal preferences are catered for. Menus are updated according to the season and in consultation with people. Mealtimes appear to be a very positive and an enjoyable social event. Meals are well presented to people eating in the dining areas or having their meals in their bedrooms.

## Environment

The environment minimises the risks to people's health and safety. Testing and servicing of firefighting, moving and handling equipment are completed within the required timescales. Staff spoken with are clear about the checks they need to undertake prior to using moving and handling equipment. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. Emergency alarms are accessible and when activated are responded to in a timely manner. Maintenance issues are resolved promptly and there is an ongoing refurbishment programme in place. Health and Safety audits of the property are completed.

Infection prevention and control measures are in place. 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 emergency exits are uncluttered and free from hazards. Domestic staff have the appropriate equipment to carry out their tasks safely. There are thorough maintenance checks, servicing, and audits in place. The environment is clean and free from malodours.

Furniture and fixtures are well maintained and replaced when needed. People's bedrooms are personalised with items of furniture, pictures, photographs and items important to the individual. Bedroom doors have the person's name displayed to help orientate. There are communal lounges and dining areas for people to socialise in each of the communities. These feel homely with pictures and points of interest. There are bilingual signs used throughout the service to help orientate people who communicate through the medium of Welsh.

The communal gardens offer people and their visitors' safe, attractive areas to sit and socialise in warm weather.

## Leadership and Management

People receive care from staff who are knowledgeable and well supported by the management team. Staff told us *“I love working in Hafan y Coed, I’ve had lots of training and I am well supported by the managers”, “I am well supported by registered nurses and managers”* and *“all the managers are really good and supportive, but [general manager and deputy] are absolutely fantastic, they are real role models!”*.

Staff 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 a thorough induction, have regular supervision and an annual appraisal. Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. We found the staff records we looked at held the required information and checks.

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.

Staff interact and support people in a caring and respectful manner, which adds to the welcoming and happy atmosphere in the service. People, their relatives and visiting professionals praise the staff and managers and their comments include *“this is an excellent home, they know how to care”, “the carers are wonderful”* and *“I’ve always seen carers supporting people appropriately and kindly. The managers are very good and professional”* and *[general manager] is something else, nothing is too much trouble for her she is always friendly, welcoming, and very hard working”*.

The service operates in line with its Statement of Purpose. There are robust governance arrangements in place. The RI is in regular contact with the service and has undertaken the three monthly Regulation 73 visits. CIW have received copies of their reports, which demonstrates they speak to people and staff as part of the visits to the service. Staff and people confirmed this with us, one staff member said; *“[RI] always asks how we are and speaks to the residents when he visits”*. There are a range of monitoring tools and audits undertaken to support the managers and the oversight by the RI. Actions from the audits are acted upon and reviewed regularly. The general manager feels supported by their line manager, the RI and the organisation.

### 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** 03/02/2023