Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Lyndell House Limited

Lyndell House Private Nursing Home, 38-40, Eaton Crescent, Swansea, SA1 4QL

01792472131

The inspection visit took place on 06/03/2026

Service Information:

Operated by:	LYNDELL HOUSE LIMITED
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Provision for mental health, Care home for adults - with personal care
Registered places:	23
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Requires Improvement
Leadership & Management	Good

Summary:

People experience good well-being. They have control over their daily lives and feel respected by staff. They make choices about routines, meals, activities and how they spend their time, with staff tailoring support to individual preferences. Feedback from residents, relatives and professionals consistently describes staff as kind, patient and attentive. People experience warm, trusting relationships that help them feel settled, safe and part of a supportive community.

Care and support is good in the service. This is generally well planned and delivered effectively. Assessments and personal plans overall are comprehensive. Staff understand individuals' needs well, including those with complex mental health conditions. Medication is well managed, with strong audit arrangements in place to keep people safe.
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The home offers a calm, homely setting with personalised bedrooms, accessible communal areas and appropriate safety measures. Kitchen arrangements are well organised, with a good Food Hygiene Rating. However, parts of the environment require refurbishment, including décor, and bathroom facilities which present infection control risks.

The service is organised with good oversight from the manager and Responsible Individual. Quality

assurance systems are in place, though the Quality-of-Care Review needs strengthening. Staff feel valued, supported and well led. Recruitment, training and supervision arrangements are strong, resulting in a competent and stable workforce that provides safe, compassionate care.

Findings:

Well-being — Good

People live healthily and safely with control over their lives. People told us they feel respected and supported to make everyday choices about their routines, activities and what matters to them. Staff know people well and respond to individual preferences, such as offering alternative meals, supporting people to attend football matches, run a choir, enjoy garden time, and take part in regular outings. Personal plans are generally comprehensive and regularly reviewed, with risk assessments in place to promote safe decision-making. People described staff as kind, patient and attentive, and relatives consistently reported that their loved ones' needs are understood and met in a way that promotes dignity and independence. Feedback from professionals also confirms that staff work proactively to maintain health and well-being, seek timely advice and ensure people receive appropriate support for their communication, mental health and physical needs.

People are safe and protected from abuse and neglect. Staff respond promptly to call bells and support people in a calm and reassuring manner. Safeguarding processes are robust, and notifications are reviewed with appropriate actions taken. Risk assessments help minimise harm and Deprivation of Liberty Safeguards (DoLS) authorisations are in place and renewed effectively. Professionals expressed confidence in the service's ability to keep people safe due to knowledgeable staff and strong managerial oversight. Recent environmental improvements, including a new lift and ongoing fire safety works, further support safety.

People are supported to cultivate safe and healthy relationships because staff are kind, respectful and familiar with individuals' preferences, routines and communication needs. Many staff have worked at the service for several years, which helps build trusting and stable relationships with residents and their families. Feedback from residents, relatives and professionals consistently described staff as*" caring, supportive*" and "*proactive*", with professionals noting people are "*settled, happy and well looked after.*" Staff feel valued and supported by the management team, which helps create a positive atmosphere. People experience warm interactions and a sense of belonging. Observations showed residents engaging comfortably with staff and each other in communal areas, taking part in activities such as nail care and puzzles.

People live in accommodation that supports their well-being outcomes. The home offers a calm, homely environment with accessible communal areas and personalised bedrooms. Safety measures, including window restrictors, clear signage and colour-coded evacuation information, are in place. Kitchen arrangements are well managed. Some areas require refurbishment, including décor, skirting boards, paintwork and bathroom facilities.

Care & Support — Good

People receive good quality of care and support they need to achieve their personal outcomes. Since the last inspection, improvements have been made to care documentation. The service now uses an electronic system for planning and delivering care. While still being embedded, staff and the manager recognise further refinement is needed to ensure it is fully effective. The files reviewed are well organised, containing comprehensive assessments and personal plans which are reviewed routinely. Personal plans generally reflect people's needs, though they would benefit from clearer evidence of involvement from individuals or their representatives and stronger capture of what matters to them. Daily notes show care is delivered as required, but records are not always completed in real time. Some inconsistencies were found in clinical monitoring, including repositioning charts and food and fluid records. These issues relate to recording practice rather than the care provided; the provider is already working on this. We will follow this up at the next inspection.

People are protected from harm and abuse. People told us they feel safe living at the service. Risk assessments are detailed and cover mobility, falls, behaviour, mental health, medication, continence, nutrition and communication. Staff demonstrate strong understanding of people's needs, including those with complex mental health presentations, and documentation shows regular engagement with health professionals. Residents described staff as kind, respectful and responsive, with relatives expressing strong confidence in the support provided. Relatives said they have "*peace of mind knowing their family member is safe and in good hands*," and professionals consistently reported staff are "*very caring, supportive and proactive in preventing risks,*" noting residents are "*settled, happy and well looked after*."

Medication is well managed within the service. An electronic MAR system supports accurate administration and is overseen by weekly managerial audits and spot checks by the clinical lead. Medication storage arrangements are secure, with appropriate temperature monitoring. Medicines taken only when required are clearly documented, handwritten entries are counter-signed, and controlled drugs are stored and recorded correctly. Covert medication is administered in line with legal requirements, including capacity assessments, GP agreement and relevant DoLS safeguards. Staff understand ordering, disposal and stock-checking procedures, and timely GP involvement is clearly evidenced. Routine audits further reduce the risk of medication errors, and no concerns were identified during this inspection.

There are effective measures in place to maintain infection control in the service while delivering care and support**.** Staff receive appropriate training in Infection Control, Food Safety and Hand Hygiene, with the staff training matrix showing strong compliance. COSHH arrangements are organised, and when issues are identified, prompt action is taken to strengthen chemical security in line with legislation. We saw staff use PPE appropriately, providing reassurance that safe infection control practices are embedded in daily care.

Environment — Requires Improvement

The home is arranged over several floors and includes a large lounge, dining area, kitchen, managers' office and a mix of bedrooms, some with en-suite facilities. Communal areas are clean and well presented, and bedrooms are personalised to varying degrees depending on individual preference. Necessary safety measures are in place, including window restrictors, secure garden access and clear signage such as people's personal evacuation requirements colour coded on bedroom doors, which supports people's safety and dignity. Planned maintenance is evident through ongoing redecoration work on the first-floor corridor, The layout allows for good access to communal areas and offers a homely atmosphere, with our observations noting a calm environment where people engaged in activities such as nail care, knitting and puzzles. The kitchen operates an effective standard of food hygiene, with the service currently holding a Food Hygiene Rating of four which is a good overall. Kitchen staff demonstrate a clear understanding of safe food handling practices, including accurate daily logging of fridge and food temperatures, appropriate management of allergens, and adherence to guidance for people requiring modified diets. Kitchen staff are suitably trained, with certificates in Level 2 and Level 3 Food Safety and HACCP observed during the inspection. A recent food safety rating of four was attributed to an issue with the required contact time for sanitising spray on work surfaces; staff are aware of this and have since adjusted practice. The Responsible Individual advised that Environmental Health would be contacted to request an earlier re-inspection, demonstrating proactive oversight and responsiveness.

The environment requires improvement. While essential safety checks, such as electrical, water, hoist, lift, PAT, emergency lighting and fire alarm testing, are largely up to date and the home is generally clean and organised. Several areas of the building show signs of disrepair, including peeling paintwork, rusted bathroom fixtures, damaged skirting boards and dated décor, some of which present infection control concerns. Safety risks were also identified, including unmarked trip hazards on the top floor, unrestricted access to internal and external stairwells for people at risk of falls, and inconsistent COSHH storage practices. Bathroom facilities require upgrading, and the status of historical asbestos works could not be evidenced. Although the provider responded promptly to several issues during the inspection and has plans to address the remaining concerns, sustained improvement is needed to ensure the environment is consistently safe, well-maintained and supportive of people's well-being. This has been raised as an area for improvement and expect the provider to take action and will follow this up at the next inspection.

Leadership & Management — Good

People are supported to achieve their outcomes because the service provider has organisational arrangements, governance and oversight to ensure smooth operations and quality care. The manager is on site most days, and the Responsible Individual (the person legally responsible for making sure the service is run properly) is regularly present and well known to staff and residents. The manager carries out routine checks? on important areas such as medication and care plans, to make sure standards stay high. The Responsible Individual also carries out formal visits in the service, where they review how the service is being managed, obtain feedback from people and staff and complete dip sampling and overview of documentation. We looked at the service's Quality-of-Care Review which is a regulatory requirement to evidence effective oversight of the service. We advised the RI to strengthen this further by utilising the guidance available to them on the Care inspectorate Wales website and increase the frequency to bi-annually as required by the regulations. Staff told us they work in a warm and supportive environment and feel valued by the manager, who they described as caring and committed to the wellbeing of residents and staff. They said queries or concerns are dealt with quickly, helped by a clear electronic system for reporting issues. Comments included*: "I have worked in a few homes, but this one is the best I've worked in. It's so lovely to work in a home where the residents are treated with such respect and dignity"* and "*The manager is always keen to listen and make changes if necessary."*

People are supported by staff with the necessary expertise, skills, and qualifications to meet people's care and support needs. Staff files show appropriate vetting, up-to-date professional registrations and timely DBS renewals, with any lapses promptly addressed. The workforce is stable and well-established, with several members having worked at the service for several years, providing continuity and strong, trusting relationships with residents. Supervision and annual appraisals are carried out in line with regulatory expectations, ensuring regular oversight and development. Training compliance is strong, with staff having completed a wide range of core and specialist courses in the last eight months, including safeguarding, Mental capacity, DoLS, infection control, food safety, moving and handling, mental health awareness, managing behaviours that challenge, dementia care and person-centred practice. Nursing and kitchen staff also hold appropriate enhanced qualifications. Staff describe feeling well supported by a proactive and approachable management team, and feedback from residents, relatives and professionals consistently highlights staff competence, professionalism and strong understanding of individual needs. This demonstrates a knowledgeable, skilled and effectively deployed workforce that can meet people's diverse and often complex needs safely and compassionately.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
The provider must have effective risk assessments in place to ensure people at risks of falls are not able to access stairwells unsupervised. ensure people have access to bathing facilities that are in good working and cosmetic order to ensure infection control and prevention is robust and the risk to people is minimised.	06/03/26

CIW has not issued any Priority action notices following this inspection.