



## Inspection Report on

**Dol Y Felin**

**Dolyfelin Homes  
Pentre Road St. Clears  
Carmarthen  
SA33 4LR**

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

**This report is also available in Welsh**

**Date Inspection Completed**

14/06/2022

**Welsh Government © Crown copyright 2022.**

*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](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## About Dol Y Felin

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Carmarthenshire County Council Adults and Children's Services
Registered places	33
Language of the service	Both
Previous Care Inspectorate Wales inspection	29/11/2019
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 manager and staff team provide a service that is respected by the people living in Dol y Felin. The Responsible Individual (RI) has good oversight of the service through their Regulation 73 visits and quality audit tools.

The health and wellbeing of individuals is important to those working in the service. People living in the service corroborate this. Care records provide a good sense of the person and their individual needs and preferences. Care workers are well trained and knowledgeable about the people living in the service.

The environment is homely but dated in places. The service is well maintained, it is clean and there are no malodours. 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 them. Care records provide information about the requirements and preferences of people.

There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. A dedicated manager who is respected by his staff team leads the service. The service liaises with health and social care professionals to make sure people remain as healthy as possible. Care staff are clear on their responsibilities to protect people and are supported by policies, which are regularly reviewed and updated.

People's choices and views are recognised. The RI seeks the views of individuals living and working in the service during Regulation 73 visits. People personalise their bedrooms with items important to them such as furniture, ornaments, photographs and artwork. They are offered choices of meals and refreshments and are involved as much as possible in their care.

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 in need of updating in some areas.

## Care and Support

Care staff have a good understanding of the needs of the people living in the service. They are able to give good details about people's history and their specific care needs. Interactions between staff and people are kind and caring and they speak positively about their roles and working in the service. They told us; *"I really enjoying working in Dol y Felin"*, *"It's a lovely place to work"* and *"I want to give the residents the care at a standard I would expect myself"*.

People are happy with the care they receive and compliment the staff, they told us, *"I am very happy in the home, staff are wonderful!"*, and *"everyone is so kind"*

All the people we spoke with tell us they feel safe living in Dol y Felin and are comfortable raising a concern if they need to. One person told us; *"I would speak to one of the girls [care workers] if I had a problem"* another person told us *"I know I can speak to the staff or manager if I am concerned about anything, so far all is great!"*

Care and support plans have good details and give a sense of the individual. People's individual needs and preferences are clearly documented and reflect the care and support provided. 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, and this is well documented in their care records

Care workers respond to requests from people in a timely manner and interactions are friendly, respectful and unrushed. A good proportion of the staff team are able to communicate in Welsh, which we observed during the inspection.

People are able to participate in regular group and individual activities; however, these have been limited during the height of the pandemic. As restrictions relax plans are afoot to increase the number of external activities and visiting entertainers for people to enjoy over the coming months.

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

The service promotes hygienic practices to reduce the risk of infection. Staff wear appropriate PPE and adhere to the current Public Health Wales (PHW) Guidance. The manager works with Environmental Health and the Local Health Board to ensure the service is meeting its obligations around infection prevention and control measures.

## Environment

Arrangements are in place to minimise risks to people's health and safety. Testing and servicing of firefighting and moving & handling equipment are carried out within the required timescales. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. Emergency alarms are accessible and when activated are responded to in a timely manner.

Infection prevention and control measures are in place, there are sanitation and PPE stations located throughout the service. COVID-19 testing procedures are in place for all visitors, who come to meet their relatives at the service. Appropriate and safe measures are in place to facilitate relatives and friends to visit. This is kept under review. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. Suitable arrangements are in place for the washing and drying of people's laundry. There are thorough maintenance checks, servicing, and audits in place. The environment is clean and free from malodours.

The layout of the service enables people to use the facilities available to them safely. In the main, the environment supports people to achieve their personal outcomes. The décor within some areas is dated and could do with refreshing and repair. Communal bathrooms are clean and a pleasant environment for people to enjoy a bath. People's bedrooms are personalised with items of furniture, ornaments, photographs and artwork. To make the environment more homely, consideration should be given to removing the number of notices around the service when appropriate to do so.

The communal gardens and grounds are well maintained and offer areas for people to socialise and enjoy during warmer weather. There is a new perimeter fence in the garden for the safety of people.

## Leadership and Management

There are robust governance arrangements in place. The RI is in regular contact with the service and has undertaken Regulation 73 visits during the Pandemic. 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 said *“the [RI] always speaks to us and the residents when she visits”* and *“she [RI] is lovely, always makes time for us”*. There are a range of monitoring tools and audits undertaken. Actions required from these audits are acted upon and reviewed regularly.

Staff are knowledgeable, and competent to care for people living in the service. Staff attend a range of mandatory and service specific training and records confirm this. Care staff told us about the training they attend and demonstrate a good understanding of their role in the protection of individuals.

Staff records show they receive a good induction, have regular supervision and an annual appraisal. Staff speak positively about the manager *“I can’t fault the support from the manager”* and *“the manager has spent time looking at ways to support me. I am very grateful to the manager for his support”*. Staff files are well organised and hold most of the required documentation. Some staff contracts of employment are held in the Human Resources department but should be readily available for inspection.

People living in the service, compliment the care workers and manager *“they are all very good here, [manager] is lovely”, “I am well looked after, and the staff are all very kind”*.

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
N/A	No non-compliance of this type was identified at this inspection	N/A



**Date Published** 11/08/2022