



Inspection Report on

Dolwen

**Dolwen
Ruthin Road
Denbigh
LL16 3ER**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

29/02/2024

Final unpublished report

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About Dolwen

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Denbighshire County Council Adults and Children's Services
Registered places	32
Language of the service	Both
Previous Care Inspectorate Wales inspection	28 February 2022
Does this service promote Welsh language and culture?	This service anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use the service.

Summary

Dolwen is a friendly and welcoming service. The residential home has four units and there is a day centre which is accessed by people in the local community. When this facility is not in use for day services it is available for meetings and activities for people living in the home. People have plenty of comfortable spaces to sit and chat within the home, or to enjoy some activities the service has to offer.

Care staff know people well and are attentive to their needs. They follow clear and detailed personal plans, ensuring health and support needs are met. Care staff are clear about people's personal outcomes and support them to achieve these.

The management of the service carefully monitor how the service is performing and their systems help to identify and act upon any issues they find. The responsible individual (RI) visits the service regularly to ensure good quality care and support is being delivered.

Well-being

People are relaxed and comfortable in their home and enjoy chatting with each other and their care staff. There are small lounges for people to sit and socialise and they welcomed us to join their conversations on the day of our inspection. People can choose how to spend their time and there are a good variety of activities on offer. We saw Easter bonnets on display which people had made for an Easter bonnet competition. Care staff support people to practice their religious beliefs and ministers visit the service regularly. The activities coordinator also organises one to one activities for people, such as supporting them to prepare a meal. People can enjoy trips into the local community, including trips to the seaside, shopping or to a local pub. People have a choice of meals and they told us they enjoy the food; one person described the food as "*fantastic*".

Care staff support people to engage in the local community and they can access volunteering opportunities if they wish. The activities coordinator organises a shop within the home, selling snacks and toiletries, and this offers people an opportunity to volunteer for the service. There are regular resident's meetings, and the ideas that are suggested are acted upon. For example, people were consulted for their views on recent redecoration to one of the lounges.

Visitors are welcome at any time, and people are supported to maintain relationships with friends and family. People have access to the day centre as a space for their own meetings and events. People can also benefit from friendly relationships with care staff, who take time to get to know people and treat them with kindness and respect. One member of staff told us "*Residents are like family*".

The service has an 'Active Offer' of the Welsh language. People can communicate in Welsh with Welsh speaking care staff. There are bilingual signs in the service, and the menu is available in both English and Welsh.

Care staff keep people safe from abuse and neglect. They receive training in safeguarding and are confident to report any concerns they have. People have Deprivation of Liberty Safeguards (DoLS) in place. This means they have someone to represent their views, and to uphold their right to request a review of their placement. People told us they feel confident to raise any issues or concerns with care staff and management.

Care and Support

People are consulted about their wishes and aspirations and their files contain detailed information about their personal history and preferences. This information forms the basis of their personal plans which are person centred and signed by the person where possible. People have personal plans which describe their outcomes and give a clear picture of the person and what they want to achieve. These plans give care staff good instructions to follow in the delivery of care, including the things each person can do for themselves. This enables care staff to promote independence for individuals. Care staff review the personal plans every month, recording a summary of how the person is doing, and ensuring the information is up to date. Care staff know people well; people described them as “*kind and caring*” and “*excellent*”.

People receive care and support which meets their needs. Care staff are patient and considerate with people and ensure that care is delivered in line with their personal plan. Care staff reposition people regularly when required to reduce the risk of pressure sores and implement half hourly observations when required, for example following a fall. The service has a good relationship with health care professionals and any concerns are reported promptly, ensuring their advice is followed. We spoke to a health care professional who told us communication with care staff is good and they will always contact them if something is out of the ordinary.

The service has safe systems in place to manage medication including secure storage facilities. Care staff receive medication competency checks to ensure they are following procedures safely. Medication administration records are clear and fully completed. People have medication care plans which contain a good level of detail, recording their preferences and support required.

The service is clean and tidy throughout. Care staff complete an infection control workbook to ensure they have up to date knowledge around safe and hygienic practices which reduce the risk of infection.

Environment

People live in a home which has plenty of places to sit and relax, enjoy activities, or meet with visitors. The home is divided into four units, each with its own lounge and dining room. Each of these areas are small and cosy and are decorated to have a homely feel. In the dining room, people can help themselves to a cup of tea from a teapot provided on each table at mealtimes. There is an area to sit and relax on the landing with bookcases, a piano and a radio. There is also an outdoor area with benches which people can relax in, this was colourful with spring bulbs during our visit. One staff member described the service as “*very homely.*”

The bedrooms are comfortable and can be decorated according to people’s personal tastes. People were proud to show us their rooms, and we saw they had brought some of their own possessions and photos from home to make it their own. All the bedroom doors have the person’s name and a picture of their choice to represent their interests.

People have access to specialist aids to meet their needs. We saw there are grabrails throughout the building. Bathrooms are spacious to allow access for mobility aids and have hoists for people to use. There is a kitchen in the day centre which has an adjustable worktop and is accessible for wheelchair users.

The service ensures health and safety requirements are met. We saw certification of gas and electrical safety. Fire and water safety checks are completed regularly and chemicals are stored securely.

Leadership and Management

The RI visits the service regularly and ensures they speak to people and staff to monitor how the service is meeting people's outcomes. These visits happen at various times of day, enabling them to see both day and night staff. The RI tours the building, considers staffing issues, and reviews a sample of files. Any required actions are recorded and are followed up at the next visit to ensure they have been addressed. There is also a six-monthly quality of care report completed for the service. The manager undertakes regular audits to ensure a good quality service is being delivered. We saw these identify issues and record the remedial action to be taken. Care staff told us management are approachable and supportive. One member of staff told us the RI visits most weeks and is approachable.

Care staff undergo thorough recruitment checks when they start employment, including disclosure and barring service (DBS) and reference checks. The manager holds regular staff meetings which allow for practice issues to be addressed and discussed. Care staff also have supervision with management. Supervision considers the wellbeing of staff and practice issues, as well as considering their learning and development in their role. Care staff receive regular core training to ensure they have the knowledge and skills required to support people. The manager is aware there is a need for care staff to access more specialist training, such as training in dementia, and specific health conditions. They are addressing this and care staff have access to online learning in these areas.

The service provider makes investment in the service to ensure it is meeting people's needs. The service is well maintained and we saw there had been recent redecoration in some areas of the home.

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