



## Inspection Report on

**Dolanog**

**Dolanog Residential Home**  
**87 Russell Road**  
**Rhyl**  
**LL18 3DU**

## Date Inspection Completed

21/03/2024

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## About Dolanog

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	DOLANOG RESIDENTIAL HOME
Registered places	28
Language of the service	English
Previous Care Inspectorate Wales inspection	11 January 2022
Does this service promote Welsh language and culture?	This is a service that 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

Dolanog is a welcoming service where people are cared for by kind and dedicated staff, who understand their needs, wishes and feelings. People are listened to, and management speak up for people to ensure they have access to the services they need. Relatives and professionals speak highly of the service and can feel relaxed knowing people are well cared for.

People have choices about where and how to spend their time. They can move around freely and have several comfortable communal areas they can access. Investment has been made to make improvements to the building and redecorate the home recently and there is ongoing work to be completed.

Care staff feel supported by the management and can approach them if they have any concerns. Some staff have worked for the service for several years and are supported to progress in their roles. The service provider has good oversight of the service making regular visits to review the quality of care being delivered.

## Well-being

People can make choices about their day to day lives. They can choose where they sit and what they do with their time. People can join in with the activities on offer, such as bingo, or to sit quietly in a different lounge. During our visit we saw a variety of programmes on different televisions including a black and white film, which people were enjoying. There are two choices on the menu and people can also request an alternative. Catering staff prepare the food from fresh ingredients and people described the food as “*lovely*”.

People are supported by care staff who maintain and promote their happiness, health and wellbeing. Care staff know people well and treat them with kindness and respect. Relatives told us care staff make people smile, and one relative commented “*care staff and management are absolutely fantastic*”. Management told us how they have supported recent celebrations for people, and one relative told us care staff had made sure their loved one enjoyed a special birthday celebration with family and friends. People attend regular health appointments to ensure their physical and mental health needs are met.

Care staff protect people from abuse and neglect. They have a good understanding of safeguarding and ensure people who lack capacity have the appropriate safeguards in place, such as deprivation of liberty safeguards (DoLS). Management and care staff communicate to ensure people’s rights are upheld. They consult with other professionals and help people to access advocacy to support their voice to be heard.

People are supported to maintain contact with relatives and friends. Visitors are welcome at any time and can join their loved ones at mealtimes. People can have access to a landline in their room enabling them to speak to relatives in privacy whenever they choose. People told us they enjoyed being able to speak directly to family and friends from the comfort of their room.

Care staff can communicate in the Welsh language if this is required. The responsible individual (RI) speaks fluent Welsh and visits the service every month, taking time to speak with people. There are varied levels of Welsh fluency amongst the staff team and care staff have access to Welsh phrasebooks to assist them if required.

## Care and Support

Care is delivered with consideration to people's needs, wishes and aspirations. Care staff consult people and their families for a detailed personal history when they move to Dolanog. This gives a clear picture of the person, their strengths, and what is important to them. We saw this information is reflected in personal plans, ensuring people are supported to do the things that matter to them. When possible, people are supported to weigh up and make their own decisions around areas of care needs, enabling them to take positive risks.

Care staff have clear and detailed personal plans to follow, which helps ensure their care and support is meeting people's personal wishes and supporting them to achieve their outcomes. A health professional told us care staff communicate well with them and follow any instructions to meet people's needs. A social care professional told us the standard of care is good, and they would be happy for their own relative to be placed in the home.

Personal plans are reviewed monthly, with a summary of how each person is managing and noting any changes in their health and care needs. Any risks are also reviewed regularly and in response to any changes in people's needs. People's health needs are clearly recorded and monitored. We saw good records for food and fluid intake and weights where these are required. A health professional told us care staff communicate well with them and follow any instructions to meet people's needs. A social care professional told us the standard of care is good, and they would be happy for their own relative to be placed in the home.

The service provider organises for the service to have a regular external infection control audit. The manager ensures any recommended actions from this are implemented in a timely manner, such as recently introducing their own three-monthly audit. This audit monitors the environment is clean and tidy and hygienic practices are being followed. There is a good supply of personal protective equipment which is used appropriately by care staff.

## Environment

People live in a homely and comfortable service. There are three communal lounges, a conservatory, an arts and crafts room, and a large dining room for people to use. People can access a patio and garden which can be enjoyed in good weather. The dining room has been recently decorated and is light and airy with bright colours. People can socialise whilst enjoying their meal, with tables set out in a homely manner. Families and visitors have access to a small lounge to meet with their loved ones, with facilities provided to prepare hot drinks. People can personalise their rooms to suit their tastes, and we saw rooms contained photographs and other items from home. The service provider is making ongoing improvements to the service, and we saw some corridors have been recently redecorated. There has also been an upgrade to the hot water system, and the dining room has been redecorated with new furniture supplied. Whilst the décor would benefit from updating in some areas, we saw ongoing improvements are being made.

The manager ensures health and safety checks are completed, gas and electrical safety certification is up to date. There has been a recent fire service risk assessment undertaken and we saw remedial action is being taken to address any improvements suggested in the report. The kitchen has a food hygiene rating of five, which is the highest that can be achieved. Kitchen staff complete daily checklists and cleaning rotas, and we saw it was tidy and well organised.

## Leadership and Management

People are supported by skilled and knowledgeable care staff. New staff to the service receive a thorough induction, and complete in-depth induction workbooks. A dedicated in-house trainer and the manager ensure there is a rolling training programme for staff. They deliver training sessions to all staff at the same time, ensuring no training is missed. Care staff have workbooks for training, which can be used when face to face training is not possible. These provide a record of their progress and knowledge. Management support care staff to progress and some care staff have completed their level four and five care qualifications. These staff can provide cover for management when required. Management complete thorough recruitment checks, including disclosure and barring service checks, when staff commence employment and ensure they receive regular supervision and an annual appraisal to support them in their practice.

The service is managed by a board of trustees who complete three monthly visits to the service. The responsible individual (RI) visits the service monthly, speaking to people and staff during their visits. They tour the building and review a selection of records to ensure procedures are being followed. They also complete a quality of care report every six months. The RI is developing these to provide more detail, such as analysis of any relevant events.

Management has an open-door policy and are available to listen to any concerns people have and to support the staff team. The care staff we spoke to told us management were supportive and approachable. We spoke to care staff who had worked for the service for several years and told us they enjoy their role and are supported to develop. One staff member told us they "*can't imagine working anywhere else*". There is a mobile app staff can access which provides advice and signposting for a variety of issues they may encounter, such as financial pressures or wellbeing concerns.

### 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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