Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Caeffair Ltd Affalon house nursing home

Caeffair Nursing Home, 2 Felinfoel Road, Llanelli, SA15 3JG

01554756332

affalon-house.com

The inspection visits for this service took place between 30/04/2026 and 13/05/2026

Service Information:

Operated by:	Caeffair Ltd
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care, Provision for mental health
Registered places:	46
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	Requires Improvement
Environment	Good
Leadership & Management	Good

Summary:

Affalon House (Caeffair) is a two-storey period property. It is situated near the town centre in Llanelli and is easily accessible by both public transport and road links, including the M4. It is close to the town centre, hospital, local surgery and other local amenities.

Well-being is good. We found people to be safe and happy. Care staff have good relationships with people, relatives and professionals visiting the service. During the inspection, we saw few opportunities for people to do things they enjoy. We did not see any evidence of any engagement or activities throughout the inspection.

Care and support require improvement. Care staff are supportive and engage with people in positive ways. Care staff have been through the provider's thorough recruitment process. Medication management requires improvement to make sure it is safe, consistent and accountable.

The environment is good. People live in an environment with appropriate and well-maintained

facilities and equipment. However, we found the home to be dusty, cluttered and in need of refurbishment in places. The service providers have a plan to address this and we saw improvements being made during our inspection.

Leadership and management are good. Care workers are up to date with their essential training, together with specific training relevant to the home. We found there have been some recent significant operational management changes at the service. We did not see continuity and consistency in the management team.

Findings:

Well-being — Good

People live healthily and safely with control over their lives. We found people to be safe and happy. Care staff have good relationships with people, relatives and professionals visiting the service. People are safe and protected from abuse and neglect. Care staff are recruited safely and robust background checks completed prior to employment starting. All new care staff engage in a period of induction and shadowing with experienced colleagues. Care staff receive training in protecting vulnerable adults and the service provider has comprehensive policies and procedures in place to support this.

We found care staff were caring, respectful and receive good training in areas such as falls prevention, oral care, medication and maintaining good hydration and nutrition. We saw the service has established strong links with health and social care professionals, drawing on their expertise when needed.

People are supported to cultivate safe and healthy relationships. We saw care staff and people engaging at mealtimes. It was also a time where people were sitting together in groups socialising with each other. Relatives and friends were encouraged to visit. We were told by a relative, *"I can visit whenever, communication is very good. They will ring me with any updates."* Another relative told us, "*Care is very good, they are very good with [relative]."*

We found the home to be dusty, cluttered and in need of refurbishment in places. We found most bedrooms lacked personal items or appropriate décor. This does not consistently support people's identity, comfort, or sense of belonging. The provider is taking action to make sure this is addressed. We will follow this up at the next inspection.

We were told the service providers have a vehicle that is used to take people out to social events, shopping and visits to the community. People's health and wellbeing is promoted by having regular access to the community.

Care & Support — Requires Improvement

People receive the quality of care and support they need to achieve their personal outcomes. Care staff are supportive and engage with people in positive ways. Care staff have been through the provider's thorough recruitment process. Team leaders oversee care staff to make sure they are meeting people's needs. All care staff receive support, training and can access policies and procedures to understand their responsibility to protect the people they support.

People are protected from harm and abuse. People have access to the relevant health and social care professionals and referrals for specialist advice are made in a timely manner. People's health needs are clear, comprehensive and up to date in personal plans. Directions are easy for care staff to understand how best to support people.

People's personal plans outline how staff should support them to achieve their well-being outcomes. Most personal plans are easy to read and provide care workers with clear information to enable them to consistently provide good quality care. People's interests, history and important relationships were not always reflected in personal plans.

People's medications are not always safely managed. Medication management requires improvement to make sure it is safe, consistent and accountable. Current arrangements are unsatisfactory and do not provide sufficient assurance that medicines are administered, recorded and reviewed in line with regulatory expectations or best practice guidance. We found inconsistent auditing leading to inaccurate counts of medicines during our inspection. Medication Administration Records (MARs) were not always completed accurately. We found incomplete and missing signatures which could reduce the reliability of the audit trail and increase the risk of medication errors. We found medicines were not consistently stored in accordance with required standards. Medicine should be kept at a certain temperature to remain effective. Variability in temperature monitoring indicate gaps in routine checks and oversight. Outcomes for people need improvement because the service provider does not effectively manage and administer medicines. We discussed this with the provider, we expect the provider to take action and this will be reviewed at the next inspection.

Peoples risk of infection is minimised. We found staff are trained in effective hand washing and this is monitored and audited regularly by the interim manager. Personal protective equipment, (PPE), is available for care staff throughout the home. We saw alcohol gel dispensers available in corridors, but many need replenishing as these were empty.

Environment

Good

People live in an environment with appropriate and well-maintained facilities and equipment. The home is safe, warm and located near to the town centre. People say they feel comfortable and happy and can choose where to spend their time. There are various communal areas and a courtyard where people can spend time relaxing with friends and relatives. The courtyard has an outside seating area giving people the opportunity to enjoy the warmer weather. The courtyard requires refurbishment if it is to provide a suitable outside space that will impact favorably on the well-being of the people who use it.

People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving.

We saw fire risk assessments are in place. There have been evacuation simulations and checks of fire safety equipment.

Personal emergency evacuation plans (PEEPs) and the emergency 'grab box' is in an easily accessible place in the event of an emergency. We did not see photographs of the people contained within the PEEPs to help identify each person quickly in the event of an emergency. This was immediately rectified by the service management.

We saw visible maintenance activity underway with improvements being made to the fire doors, the sluice facilities and flooring. Some rooms were recently decorated and well-presented. Some rooms showed visible dust, clutter and inadequate cleaning routines. Damage such as worn flooring, chipped paint and broken fixtures were visible in places and do not consistently reflect a homely, well-kept environment. The service providers have a plan to address this and we saw improvements being made during our inspection. This will be followed up at next inspection.

Leadership & Management — Good

People are supported to achieve their outcomes because the service provider has effective organisational arrangements, governance and oversight to ensure smooth operations and high-quality care.

People are supported by staff with the necessary expertise, skills and qualifications to meet people's care and support needs. Care staff are recruited safely and robust background checks completed prior to employment starting. All new care staff engage in a period of induction and shadowing with experienced colleagues. Most care staff are registered with Social Care Wales (SCW) the work force regulator. Care staff receive training in protecting vulnerable adults and the service provider has comprehensive policies and procedures in place to support this. Care staff have good knowledge of their responsibilities regarding safeguarding people and know how to report any concerns they may have.

Care staff are up to date with their essential training, together with specific training relevant to the home. Care staff say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. All aspects of the service have been summarised in three-monthly visits from the Responsible Individual (RI). Employees discuss any issues they wish to raise in confidential three-monthly supervision meetings.

We found there have been some recent significant operational management changes at the service. The provider recognises the benefit of consistency and continuity in management and is currently recruiting additional resources in the service with the introduction of a new temporary manager. The provider is currently in the process of recruiting a new permanent manager and three nursing staff. This team, who will be new in post, will take time to embed and we will expect to see improvements continue and stability of the management of the service maintained. One staff member told us, *"It's been hard with management change."*

Assurances have been given that the continuity of the management team will be addressed. This will be considered at the next inspection.

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
People are at risk of harm due to this short coming in the effective management of medication, as people may receive the wrong amount of medication. Regulation 58 places a requirement on the service provider to have arrangements in place to ensure that medicines are stored and administered safely. These arrangements must include the arrangements for maintaining a sufficient supply of medicines, the effective ordering, re-ordering, recording, handling and disposal of medicines.	30/04/26

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