Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Glan y Felin

3 Commercial Road, Rhydyfro Pontardawe, Swansea, SA8 4SL

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https://accomplish-group.co.uk

Date of Inspection: 28.09.2026

Service Information:

Operated by:	Accomplish group ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care and support for people with a learning disability, Care and support for people with mental health needs
Registered places:	7
Main language(s):	English and Welsh
Promotion of Welsh language and culture:	The service provider anticipates, identifies, and meets the Welsh language and cultural needs of people.

Ratings:

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

Summary:

Glan Y Felin care home in Pontardawe, supports up to seven adults, living with mental health needs and learning disabilities.

People experience good wellbeing outcomes through consistent, person- centred support from a skilled staff team, which promotes independence, choice and control while upholding peoples' rights. They have choice and control over their daily lives and receive support to maintain relationships, pursue interests.

The care and support provided is good. People receive personalised care from staff who know them well. Personal plans and risk assessments guide staff practice, and people receive support to access healthcare and manage their medicines safely.

The home environment is warm, clean and homely and supports people's comfort and independence. Safety checks are completed and bedrooms are personalised and meet people's needs. The provider has identified further improvements to the garden, kitchen and flooring, which do not currently have a significant impact on people.

Leadership and management oversight arrangements are effective. The Responsible Individual (RI) visits regularly and seeks feedback from people using the service to support ongoing improvement. Leadership and governance promote a positive culture through audits, feedback and regular review. Staff feel supported in their role through appropriate training, supervision and guidance, enabling them to provide safe, consistent and responsive care.

Findings:

Well-being — Good

People are supported to achieve positive wellbeing outcomes, with choice and control in their daily lives. Care staff understand and respond to people's physical, mental, emotional, and social needs. People told us they are supported to stay active and do as much as they can for themselves, and decisions made reflect their wishes and best interests. One person commented, *"I like it here, I get to choose how I spent my day. Staff support me to go for activities and to go to the bank when I need to."* People's representatives told us they are kept informed and involved in meetings, as appropriate. We saw people are supported to make informed decisions about their lives; are encouraged to continue to do what they can for themselves and are provided with support where needed. Records we reviewed evidence personal beliefs and choices are respected.

People are supported to use Welsh if they wish. We saw Welsh-language resources and heard a person speaking Welsh with a member of staff. The manager and some staff speak Welsh. People and their representatives told us English is their preferred language.

People are treated with dignity and respect and feel safe. The personal plans, risk assessments and incident records we sampled showed staff identify and review risks. Staff described the action they would take if they had a safeguarding concern and demonstrate a clear understanding of their responsibilities to protect people from harm and promote their safety. They have access to safeguarding policies and procedures. The evidence gathered during the inspection is consistent with the positive feedback received from people and supports our findings people feel safe and protected within the service.

People have access to activities which reflect their interests and preferences, supporting community engagement and social inclusion. People's representatives expressed how much these meaningful activities are important to people's well-being. The outdoor space is well used, and there are opportunities for people to get involved in its ongoing development. This supports well-being, promotes choice and achieves positive outcomes.

People are supported to maintain a healthy lifestyle through access to a balanced and nutritious diet, with meals designed to promote positive health outcomes and meet individual needs and preferences. They are involved in planning meals; alternatives are available and feedback about food was positive.

Care & Support — Good

Care staff support people to communicate their choices and make informed decisions about their care and daily lives. Practice observed and records reviewed, demonstrate a person-centred approach whilst promoting rights, well-being and personal outcomes. Staff understand people's communication needs and use appropriate strategies to enable them to express their wishes, feelings and preferences. They also take account of life histories, known behaviours and previously expressed wishes, particularly when there are changes in mood or presentation. Staff told us they receive appropriate training to respond effectively to identified needs.

Where restrictions on liberty are appropriate, Deprivation of Liberty Safeguards authorisations are in place, overseen by the manager who demonstrated awareness in working closely with the local authority regarding future requirements. Any restrictions are clearly documented and supported by an appropriate best-interest decision-making processes. Discussions with staff demonstrate a sound understanding of consent and the importance of ensuring consent is informed and meaningful. Records show decisions are made in line with each person's assessed needs, preferences and individual circumstances, reflecting a personalised approach to care and support.

The service provider completes pre-admission assessments to ensure people's needs can be met alongside those already using the service. Information is gathered from people, their representatives, and relevant professionals. We saw staff are proactive in making referrals to a range of healthcare services, including GPs and community psychiatric teams when required and are supported to attend GP appointments for their health needs. Information is shared promptly and changes in health needs are reported in a timely manner.

Care and support plans contain up-to-date information and are written in a respectful, dignified and a person-centred manner, often using first-person language. Records reviewed and discussions held with staff demonstrate a clear focus on achieving positive outcomes for people. Personal plans provide consistent guidance for staff and reflect an individualised approach to support. We also found through review of records, incidents are appropriately recorded and reported to relevant professionals in a timely way.

Medication is administered as prescribed, with safe storage, regular reviews and relationships with local pharmacies and GPs.

Environment

Good

The environment is clean, safe and well maintained, with evidence of recent redecoration throughout. Appropriate identification checks and a visitor signing-in system is in place to ensure only authorised individuals access the service. Bedrooms are spacious, personalised and equipped with en-suite facilities, with some also benefiting from kitchenette areas. Personal photographs, belongings and soft furnishings reflect individual preferences and promote a sense of comfort and ownership. The environment is suitable for people with varying mobility needs, with a stairlift available where required. Communal areas provide opportunities for people to socialise, relax and maintain their independence.

We saw some people have identified sensory needs. A dedicated sensory room is being developed to enhance the support available. Once completed, this will provide a tailored environment to promote well-being, sensory regulation and positive outcomes.

The back garden requires further development to improve its overall condition and maximise opportunities for outdoor activities, social interaction and well-being. Plans are in place to enhance the area. There are also plans to improve the kitchen and fit new flooring. The identified improvements do not have a significant impact on people's comfort and access to care. However, timely completion of the planned work will help maintain a safe and pleasant environment.

People are protected from the risk of infection through effective infection prevention and control practices. We found the environment is clean, well maintained and promotes people's safety and well-being. Food hygiene standards are good, and the service has achieved a Food Hygiene rating of 4, reflecting good standards of food safety.

Staff demonstrate good knowledge of safe practices, including appropriate use of personal protective equipment (PPE) when needed, with systems in place to monitor supplies and minimise risk. The service provider ensures the premises complies with relevant legislation and guidance. Health and safety systems are in place, including fire risk assessments, secure storage of hazardous substances and water safety checks such as legionella monitoring. Gas and electrical testing are completed within required timescales. Fire safety is managed, with regular drills and clear Personal Emergency Evacuation Plans (PEEPs) to support safe evacuation in an emergency. Two further days are booked for fire drill exercises, this demonstrates a proactive and ongoing approach to fire safety, ensuring staff are prepared to respond effectively in the event of an emergency.

The service has CCTV in place outside to enhance the safety and security of people living at the home, staff and visitors. The use of CCTV supports the monitoring of incidents and helps promote a safe environment. The use of CCTV is managed in line with the relevant policies and procedures, with due regard given to people's privacy and dignity.

Leadership & Management — Good

The management team demonstrate strong leadership, skilled practice and a clear commitment to achieving positive outcomes for people. The manager is visible and approachable and promotes a positive, person-centred culture. She identifies key areas for improvement to further enhance outcomes for people. Staff, we spoke with, say they feel well supported by the manager, who maintains an open management style. People's representatives also spoke positively about the manager. Effective management oversight and quality assurance systems support the monitoring of incidents, compliance and service performance, driving continuous improvement across the service.

Governance and quality assurance processes demonstrate a clear focus on continuous improvement. We found effective governance systems are in place to monitor standards, drive service development and ensure care and support remains aligned with people's needs, wishes and preferences. The RI maintains effective oversight through regular three-monthly visits, which incorporate feedback from people and staff. Quality of care reports are completed in a timely manner and provide effective monitoring of service delivery.

Policies and procedures are up to date, with some under review, and are consistently applied in practice. These documents reflect relevant legislation, guidance and best practice. Leaders ensure policies and procedures are accessible and embedded through supervision, training and team meetings, promoting consistency, accountability and good standards of care.

Staff are safely recruited, appropriately inducted and receive ongoing training to meet people's needs. The provider is committed to maintaining a skilled and well-supported workforce. All care staff are registered with Social Care Wales, the work force regulator, and meet required qualification standards. Recruitment and vetting processes are effective, with timely Disclosure and Barring Service (DBS) renewals. Staff report feeling well supported through regular supervision, training, appraisal and a stable working environment, which promotes retention and morale. Team meetings are held regularly to ensure staff are informed of people's changing needs and can respond appropriately. These meetings also provide opportunities to share learning and promote continuous improvement. The stable staff team is dedicated, and provide good continuity of care and support, this is a strength of the service.

The manager undertakes structured audits which consistently identifies areas for improvement and informs timely action. There is a clear culture of openness, with learning identified from incidents and or near misses. Supervision records evidence ongoing staff development, supported by proactive leadership and effective oversight. The provider responds proactively to newly identified risks, including those not previously anticipated in care planning, and uses learning from incidents to strengthen care plans and enhance people's safety, dignity and wellbeing.

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.

CIW has no areas for improvement identified following this inspection.

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

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