Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Duffryn House

Aberdare

Date Inspection Completed

22/01/2025

About Duffryn House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PROSPER CARE & SUPPORT LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	[01/08/2023]
Does this service promote Welsh language and culture?	This service 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

People living at Duffryn House receive very good person-centred care and support. Care staff are passionate and know the people they support very well and are familiar with their needs and routines. People living at the home are able to access their community and participate in activities of their choosing. People told us they are very happy living at the home and are supported to live active lives. People's relatives also provided complimentary feedback regarding the service their loved ones receive.

Details of the care and support people require is clearly documented in their personal plans. Care documentation is reviewed regularly to ensure it remains current. Care staff feel they are supported by the management and are happy working at the service. Suitable governance arrangements are in place, helping the service run smoothly. The Responsible Individual (RI) has good oversight of the service and regular quality assurance monitoring takes place. The environment is clean, comfortable and well-presented. Regular audits and an ongoing maintenance programme ensures the environment is safe.

Well-being

The service supports people's overall wellbeing. A range of personal plans and risk assessments identify how to meet each person's care and support needs. Personal plans are detailed and person-centred. Plans clearly outline the level of care and support people require enabling care workers to best support them. Relationships with family members are supported and people enjoy day trips, holidays, and accessing the community. Healthy lifestyles and healthy eating are supported. Medication is managed in line with prescriptions and regular health appointments support people's overall health and wellbeing. The home encourages choice and decision making and people tell us they are able to spend time doing things they enjoy. Monthly key worker sessions take place which enables people to feel listened to and are at the centre of their care.

The (RI) gathers feedback on people's experiences on a regular basis. Staffing levels are sufficient to meet the needs of people using the service. A clean, comfortable environment helps support people's well-being. The home is well maintained. Bedrooms are personalised to people's preferences and there are sufficient communal areas available. People are protected from harm and neglect. Staff have received training in safeguarding vulnerable people. Care staff we spoke with are aware of the process for raising concerns and have access to the safeguarding and whistleblowing policies. Care staff feel they are confident that any issues raised with the manager will be actioned promptly. People are supported to maintain and improve their health and well-being through access to specialist care and advice when they need it.

Care and Support

People are supported to maintain their independence and generally appear to live together as a harmonious unit. Everyone living at Duffryn House have lived together for a number of years. Care staff support people to complete as much of their personal care, domestic tasks and laundry as they are able to. People gave positive feedback about the home such as "*Staff are good to me*", and "*I like living here*". Positive feedback was also received from people's relatives who said, "*The staff are kind, and my son gets on well with everyone*", and "*My son loves living there".*

Assessments are completed prior to people coming into the home. This ensures the home is able to meet individual needs and to provide the support necessary for people to achieve personal outcomes. Detailed personal plans provide a real sense of the person, their life experiences, preferences, and routines. Plans centre on positive outcomes and provide staff with an understanding of how care should be provided. People are supported to be as independent as they can. Information recorded in personal plans include care plans and risk assessments. Care staff complete daily recordings which give a detailed account of care and support provided. Reviews of care documentation take place every three months and updates are implemented if needed. Deprivation of Liberty Safeguards (DoLS) authorisations are in place for people who lack mental capacity to make decisions regarding their care and support. These authorisations ensure care and support provided, which may deprive people of their liberty, is legal.

Care staff support people to eat as varied and as balanced a diet as they can. People are able to request their food preferences. We saw people have access to a range of activities they enjoy which promote inclusion and social interaction. On the day of inspection, we saw care staff taking people out to activities within the community. We saw positive interactions between care staff and people in a relaxed environment. Medication audits are in place. Medication is securely stored and can only be accessed by authorised personnel. Care staff receive relevant training and follow a medication policy promoting safe practice. Medication is frequently audited. We looked at a number of medication administration recording charts and found there were some gaps in signatures. The home is implementing additional measures to ensure this is rectified.

Environment

People live in an environment which supports their wellbeing. The home is well-presented. Staff follow a cleaning schedule which promotes good standards of cleanliness and hygiene. People's bedrooms are personalised to their specific preferences, containing photos and decorations which make the environment feel homely and familiar. There are sufficient toilet and bathing facilities. The service has recently undertaken renovation of rooms within the home and garden. The home has a garden with seating available, providing a space where people can relax or participate in activities. There is a good variety of home cooked meals available. One person living at the home said, "*The food is nice and I help to cook the food*".

People are protected from unauthorised access. Entry to the home is secure, with visitors having to sign in before entry and sign out on departure. Ongoing checks and maintenance ensure the environment remains safe. People's personal information, together with employee personnel records, are stored safely, and are only available to authorised members of the staff team. We saw records of routine utilities and equipment testing. Fire safety tests and drills are completed regularly. Personal emergency evacuation plans (PEEPs) provide guidance on how people should be safely evacuated in the event of an emergency. Substances hazardous to health are stored securely and there are no obvious trip hazards. Repairs to the property are completed in a timely manner.

Leadership and Management

Care staff feel supported within their roles and are trained to meet the needs of the people they support. Care staff we spoke with say they enjoy working at the service and provided complimentary feedback regarding the manager. Staff told us *“The manager is very supportive any issues we can always approach them and talk to them”. Another staff member said, “I love working here we are able to spend quality time with people living at the home”.* We saw supervision and appraisal records which show care staff receive the required levels of formal support, which corresponds with the positive feedback we received. Overall, staff recruitment files contain the required information and checks to ensure they hold the necessary skills and are of good character. Care staff are registered with Social Care Wales (SCW), the workforce regulator. Records show staff have a good induction and training. Care staff told us they receive sufficient training to carry out their duties effectively and safely. Training information shows care staff are compliant with their training requirements. There is a clear staffing structure in place. All staff we spoke with understand their roles and responsibilities.

There are systems and processes in place to monitor, review and improve the quality of care and support provided. The manager has oversight of the service. Policies and procedures underpin safe practice, are kept under review and updated when necessary. We saw the RI regularly meets with people and staff to gather feedback to inform improvements. The quality of care provided is reviewed in line with regulation and a report is published on a six-monthly basis.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	

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