



Inspection Report on

Duffryn House

Aberdare

Date Inspection Completed

31/03/2022

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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	This was the service's first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Duffryn House is a small residential home providing personal care for up to four people aged 18 years and over with Autism Spectrum Disorder, Learning Disabilities and associated complex needs. The Responsible Individual (RI) is Stuart Griffiths. There is a manager who is suitably qualified and registered with Social care Wales.

People are cared for in a warm, stimulating environment by a dedicated team of staff who know their needs well. A person centred approach to care planning ensures people's outcomes are identified and met. Care staff are aware of safeguarding procedures and there are policies that aim to protect people from harm and abuse.

Staff recruitment is safe and effective and sufficient staffing levels are in place. The manager is approachable and provides appropriate levels of support to care staff. Current infection control measures ensure members of the staff team are compliant with Public Health Wales (PHW) guidance.

The environment is clean, homely and well maintained. People are encouraged to personalise their rooms. They have access to safe and secure outside space.

Well-being

People have positive relationships with care staff who treat them with kindness and respect. People appeared relaxed and content and told us they are happy at Duffryn House. Relatives told us they are happy with the care and support their loved ones receive; they feel listened to and are able to speak to care staff if they have any concerns or issues. The home has a consistent care staff team, which supports people to maintain relationships with their loved ones. Care staff appear confident and enthusiastic in their roles and know people's needs well. We saw that staff make every effort to engage with people using a variety of communication methods on a day-to-day basis and to gain feedback on their wishes.

We spoke with relatives of residents who were all very happy with the care and support given to their loved ones. They told us:

'I like them [care staff]'

'X loves it there'

'X is really thriving there'

'X is going 'from strength to strength''

'Carers are super friendly'

'I can't fault it'

The service promotes people's physical and mental well-being. Personal plans and risk assessments are person centred and detailed. People are supported to maintain contact and have visits from their loved ones. We saw that people's rooms are personalised and areas decorated and maintained to a good standard.

There are systems in place to safeguard people from harm. Staff consistently wear Personal Protective Equipment (PPE) to prevent the spread of infection. Appropriate infection control measures reduce the risk of cross infection.

Care and Support

People experience warmth and kindness. People appeared relaxed and comfortable in the presence of care staff, who treat them as individuals. Care staff speak in a friendly, caring and respectful way and people respond positively. People we spoke with were able to express that they are happy and well cared for.

People receive continuity of care from an established care staff team. Care staff know the people they support well and are able to anticipate their needs and wants. There are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. Care staff are supportive of each other and complimentary of the support colleagues and members of the management team provide. Care staff told us: *'It's brilliant.'*

'It's great, I'm really enjoying it.'

Safeguarding measures help protect people from harm and abuse. Safeguarding and whistleblowing policies contain up-to-date information and are reviewed regularly. Care staff told us they are aware of their safeguarding responsibilities and know the process for raising a concern if they need to. Care staff told us they know how to report issues to the manager and are confident that the manager takes appropriate action. Care staff are recruited safely and safeguarding training forms part of the services core training requirements. Incidents are appropriately reported to the local safeguarding team. Staff liaise with relevant professionals to keep people well. Medication is stored appropriately and administered in line with the prescriber's recommendations. We saw evidence of this in people's personal plans where medical appointments and correspondence is documented.

Care plans and reviews consider people's personal outcomes, as well as the practical care and support they require. People have an accurate and up to date personal plan and risk assessments detailing how they want their care delivered. We looked at two care files and saw that information available to staff is detailed, up to date and reflects the current needs of people. Personal plans are detailed and record people's preferences. We saw evidence of reviews, which people are involved in to review their achievements and plan future goals. Staff confirm care records are easily available; they are informed of changes in care needs and given time to read information and updates after any absence from work. Supplementary paperwork, such as daily notes are comprehensively completed.

Infection control practices are robust. The service has adequate supplies of Personal Protective Equipment (PPE). Throughout our inspection, we saw staff wearing these appropriately, in line with current guidance. Any visitors to the service are required to have a Lateral Flow Test and wear appropriate PPE.

Environment

People have access to pleasant and well maintained indoor and outdoor space. Bedrooms and communal areas have furnishings and decoration appropriate to people's needs and wishes. There is a main kitchen for food preparation, which is used to support people to practice and improve their activities of daily living. The garden area is well maintained and contains a mixture of patio, grassed areas, with seating and raised flowerbeds.

The home has secure entrance doors to prevent unauthorised entry. Medication and confidential information is stored securely. Restricted areas are locked and are only accessible to authorised personnel.

People and their relatives told us rooms are decorated to their preference and contain items that are important to them. We undertook a tour of the home and saw that it was clean and extremely well maintained.

We found substances hazardous to health stored safely and communal areas uncluttered and free from hazards. Maintenance records confirm the routine completion of utilities and fire safety testing by appropriate people. Food hygiene checks are carried out daily. Where required, temperature checks are recorded and monitored.

Leadership and Management

Care staff work in a supportive environment. Systems are in place to ensure staff receive regular supervision and support, where they discuss their professional conduct and development with their line manager. Staff told us they feel well supported, with comments such as '*X [the manager] is great, very approachable*'. Team meetings are arranged for peer support and to share important information. Daily handover records are detailed and informative. The RI is very involved in the running of the service and meets regularly with people using the service and staff.

Recruitment measures ensure care staff working at the home have the right skills and approach to care. The service provider safely recruits and vets staff before they start their employment and staff are appropriately trained to undertake their role. Staff understand their responsibilities to safeguard vulnerable adults and relay any concerns to the management team. Staff are positive about the quality of training and support they have.

Arrangements for governance and quality assurance allow the service to identify areas for improvement. The manager is passionate about the service, knows the individuals well, and has good oversight of the care and support being given to people on a daily basis. The manager undertakes regular audits and ensures notifiable events are reported to the appropriate agencies. The RI visits the service regularly, and compiles quality of care reports highlighting what is working well at Duffryn House, along with any areas where improvements need to be made.

The service delivers in line with its written information. It has a Statement of Purpose that sets out its aims, values and explains how it will support people to achieve their personal outcomes. Policies and procedures support people's overall well-being. We examined a selection of policies and found them to contain clear up-to-date guidance that is reviewed.

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

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