

# Inspection Report on

The Daffodils Care Home

The Daffodils Care Home 14 Dynevor Street Merthyr Tydfil CF48 1AY

## **Date Inspection Completed**

09/11/2023



### **About The Daffodils Care Home**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	HC One Limited
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	14 <sup>th</sup> November 2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

#### Summary

People living at The Daffodils are pleased with the standard of care they receive. Care and support is delivered in a dignified respectful way. Care workers are experienced, responsive, and compassionate. Care workers know people well and understand how to support them. Care documentation is person-centred, highlighting people's personal outcomes. Risks to people's health and safety are considered and effectively managed. People are supported to remain healthy and have good access to medical and social care professionals. Activities are on offer to keep people occupied and engaged.

Care workers are trained to meet the needs of the people they support and receive the required level of formal support from the management. Governance and quality assurance measures are good. The Responsible Individual (RI) visits the service regularly to maintain oversight. Quality of care reviews are regularly held and help the service reflect and develop. The environment is maintained to a high standard and is clean and comfortable throughout.

#### Well-being

The service supports people to remain happy and healthy. People have access to a programme of activities aimed to promote inclusion and social interaction. Routine health appointments, timely referrals and effective care planning supports people's overall well-being. People receive their medication as directed by the prescriber. Meal options are balanced. People have a choice of nutritious meals and those with special dietary requirements are catered for. There are appropriate infection prevention and control measures in place which are reflective of the services infection control policy.

People are treated with dignity and respect. Some care workers have worked at the service for several years and have developed positive relationships with people. We witnessed positive interactions between people and care workers throughout our inspection and people told us care workers are respectful and kind. Personal plans are tailored to peoples needs and are produced with input from people and their representatives. Positive feedback from people and their representatives suggests the service provides a good standard of care and support.

People are protected from harm and abuse. Care plans and risk assessments set out safe ways of supporting people. There is a safeguarding policy and care workers receive relevant training. Care workers we spoke to are confident in their ability to raise concerns and are aware of the reporting process. Incidents and accidents are logged and reported to the relevant agencies when needed.

People live in a well-maintained environment which supports their well-being. The service is clean throughout and is suitably furnished and decorated. Communal areas are comfortable and well-presented providing a space people can enjoy. People's rooms are personalised to their preference. An ongoing programme of maintenance and repair ensures the environment, it's facilities, and equipment are safe.

The service provides an active offer of the Welsh language with documentation and support available in the medium of Welsh by request.

#### **Care and Support**

Care workers have up to date knowledge of people's needs. Prior to being admitted to the home, people are subject to an initial assessment to determine if the home is suitable and their needs can be met. Personal plans are then developed setting out people's care and support needs. Personal plans are person-centred and give care workers clear direction on how best to support people to achieve their outcomes. Risk assessments are in place to direct care workers with the measures needed for keeping people safe. Personal plans are produced in conjunction with people and their representatives. Regular reviews are conducted to ensure personal plans remain current and people are receiving the required level of care and support.

People told us they are very happy at the home, and they have good relationships with care workers. Throughout the time we spent at The Daffodils we witnessed care workers engaging with people in a positive manner. We saw meaningful conversations and laughter. It was clear care workers hold people in high regard and respect them. People provided us with consistently positive feedback regarding the care and support they receive. One person said, "It's great here, it's much better than the other home I was in. The staff are lovely". Another person told us, "The staff are really good, we have a bit of fun with them". Positive feedback was also received from people's representatives who used words like "absolutely fabulous", "marvellous", and "above excellent" to describe the service and the care provided.

Activities are on offer to keep people active and engaged. There are two activities coordinators employed and there is a timetable setting out a programme of daily activities. We saw people participating in an arts and crafts session, making a display for Remembrance Day, and later enjoying a quiz. The service has access to a minibus, and we were told this is used to enable people to access the community. As well as group activities people get the opportunity to participate in individualised activities. We observed one person being supported to visit a distillery where they enjoyed tasting locally produced whiskey.

There are arrangements in place for the safe storage and administration of medication. Medication is securely stored. Care workers receive medication training and there is a medication policy which is aligned with best practice guidance. All medication administrations are recorded on an electronic medication administration record (EMAR). Regular medication audits are completed and there are suitable arrangements in place for the ordering and disposal of unwanted medications.

#### **Environment**

People's well-being is enhanced by living in an environment which is safe and suited to their needs. The home is safe from unauthorised access with visitors having to sign in on arrival and out on departure. The home is set over two floors with lift access to the upper floor for those with mobility problems. The home is clean and tidy throughout. There are domestic staff at the home daily. They follow a cleaning rota which helps maintain high standards of cleanliness and hygiene. Communal areas are comfortable and well presented. We observed people relaxing in communal areas which suggests they are pleased with the environment. There are sufficient toilet and bathing facilities and there is specialist equipment such as hoists available for those who need it. Assessments are completed to gather people's views on how they would like their rooms decorated. We saw people's rooms are individualised to their tastes, containing photos, decorations, and keepsakes. There is a garden area with seating; people can access this to relax or participate in activities. Standards of hygiene in the kitchen have been assessed by the Food Standards Agency as being good. The laundry is suitable for the size of the home and there are appropriate infection control measures in place reducing the risk of cross contamination.

The environment is safe. All people living at the service have a personal emergency evacuation plan (PEEP) in place. These provide information to staff regarding the best ways of supporting people to leave the building in the event of an emergency. There is an up-to-date fire risk assessment and fire safety features are routinely tested and serviced. Substances hazardous to health are stored in line with the relevant regulations and can only be accessed by authorised personnel. Maintenance records confirm the routine testing of utilities such as gas, electricity, and water. The home is well organised and there is sufficient storage. We did not identify any significant hazards on the day of our inspection.

#### **Leadership and Management**

There are systems in place supporting the running of the service. The service has good governance, auditing, and quality assurance measures in place. The RI visits the home regularly and discusses operational matters and service delivery with staff and people. The RI also analyses a range of different areas relating to people, staffing, and the environment to look for areas of good practice and identify where improvements are needed. Every six months a quality-of-care review is conducted. We looked at the latest quality of care reports and found they clearly highlight the services strengths as well as identifying areas for further development. The service is open and transparent, identifying and acting to resolve issues and making the legally required notifications to Care Inspectorate Wales regarding occurrences at the service. Policies and procedures promote safe practice. We examined a cross section of the services policies including safeguarding, medication, and complaints. We found information was reflective of current best practice and statutory guidance.

Care workers enjoy working at the service and feel supported by the manager. We saw evidence care workers receive supervision and appraisal in line with regulation. This helps aid their professional development and gives them the opportunity to discuss things like workload or any concerns they may have. Care staff we spoke to confirm the manager is accessible and provides a good level of support. They used words like "fab", "supportive" and "approachable" to describe them. Care workers told us the home can be busy and they sometimes felt rushed. We discussed this with the management team who assured us staffing levels are kept under review and agency staff are used when staffing levels are low. We noted staffing levels on the day of our inspection were reflective of the current rota.

Care workers are safely recruited and trained to meet the needs of the people they support. Personnel files we viewed contained all the required pre-employment checks. These include references from previous employers, employment history checks, and Disclosure and Barring Service (DBS) checks. We saw a number of care workers DBS certificates had expired. We discussed this with the management team who assured us they were in the process of being renewed. On commencement of employment care workers must complete a structured induction and shadow experienced members of the team. Following this care workers have access to an ongoing programme of training and development to ensure they remain sufficiently skilled.

	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
36	The provider is not compliant with regulation 36(2) because not all staff have received supervision every three months.	Achieved
56	The provider is not compliant with Regulation 56(1) because issues relation to hygienic food handling and management of food safety were identified at a recent inspection by The Food Standards Agency	Achieved

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**Date Published** 04/12/2023