



Inspection Report on

The Daffodils Care Home

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

Date Inspection Completed

14/11/2022

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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	09 November 2021
Does this service provide the Welsh Language active offer?	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 and support they receive. Care documentation is person-centred and clearly highlights the best ways of supporting people as well as identifying any risks to their health, safety, and overall well-being. Care documentation is reviewed periodically to ensure all information recorded is relevant. The service has robust auditing and governance arrangements so it can reflect and identify areas for improvement. There are policies and procedures in place to help protect people from harm and abuse and promote safe practice. Care workers are safely recruited and trained to meet the needs of the people they support. Improvements are required to ensure care workers receive the required levels of supervision. Care workers told us they like working at the service and have fostered positive working relationships with the people they care for. The environment is maintained to a high standard with good quality furnishings and décor throughout. Domestic workers are at the service daily maintaining good standards of cleanliness and hygiene. However, improvements are required to ensure standards of hygiene in the kitchen are of a satisfactory standard.

Well-being

People are protected from harm and abuse. Policies including safeguarding and whistleblowing provide care workers with information relating to safeguarding procedures and how to raise concerns. Care workers receive relevant training and are sufficiently skilled. There is a safe recruitment process ensuring care workers have the right skills and attitude to work in the care sector. Risks to people's health, safety and overall well-being are thoroughly assessed and appropriately managed.

People have access to a good standard of care and support. People living at the service have a personal plan which contains information relating to their specific care and support needs. Personal plans are outcome focused outlining the best ways to support people to achieve their outcomes. We saw evidence the home liaises with healthcare professionals ensuring people get the right care at the right time. Medication is administered as prescribed and stored safely.

People have control over their day-to-day lives. Care workers have good relationships with people and treat them with dignity and respect. People and their representatives are involved in the care planning process to ensure care and support is person-centred. Activities are held within the home and local community and promote physical well-being and social interaction. People have a good choice of nutritious meals and those with special dietary requirements are catered for. However, improvements are required in relation to hygienic food handling and management of food safety.

The environment is well maintained and helps support people's well-being. We observed people within communal areas of the home, they appeared relaxed and comfortable. Bedrooms are personalised to people's preference. Specialist equipment is available to assist people with mobility needs. Routine checks, servicing and maintenance of the environment and its facilities promotes safety. The home appeared clean throughout.

Care and Support

People experience a good standard of care and support delivered by an established team of care workers. We observed positive interactions between care workers and people. It was clear care workers know the people they support well and are familiar with their needs, wants, and routines. People we spoke with provided consistently positive feedback regarding care workers. One said, *“The staff are alright. I get on with all of them, they do good work”*. Another person told us, *“The staff are great. Some of them are very funny and they’re all friendly”*. People have access to a range of activities which promotes their overall well-being. There is an activity coordinator who arranges activities within the home and local community. We saw a group of people enjoying an exercise session in one of the homes lounge areas.

People’s personal plans provide care workers with up-to-date information regarding their care and support needs. The service adopts a person-centred approach to care planning. This means care and support is tailored to each person’s specific set of circumstances. Risk assessments highlight people’s vulnerabilities and set out ways of keeping people safe. We saw personal plans are reviewed regularly to make sure people are receiving the best possible care and support.

The service offers a good choice of food for people to enjoy. We viewed a variety of options on the menu and saw there were alternatives available for people who are vegetarian or vegan. People told us the quality of the food at the home is of a good standard. We saw plans in place for people with special dietary needs highlighting people’s preference and preparation instructions. We saw people having drinks to keep them hydrated and observed care workers providing support at mealtimes.

Support is available for people with medication needs. Medication is stored appropriately and administered by trained care workers. People have plans in place outlining their specific medication regimes. There is a medication policy and regular audits are undertaken to identify any discrepancies and for the service to act where any shortfalls arise. Electronic medication recording charts are used to record all medication administrations. We observed a care worker using the system and found it was very time consuming due to the slow WI-FI connection at the home. We discussed this with the manager who told us the system is being upgraded and that the issue would soon be resolved.

Environment

The Daffodils is clean, comfortable, and adapted to people's needs. The home is set over two floors with a lift available for people residing on the upper floor who have mobility needs. People's rooms are personalised to their preference, nicely decorated, and comfortably furnished. There are communal bathrooms and shower rooms on both floors which have been recently renovated and contain specialist equipment for those who require it. Communal areas are well presented and comfortable. We note all communal areas including lounges, dining rooms and corridors have recently been re-decorated to a high standard. Standards of cleanliness and hygiene in the home are good. We saw domestic workers are at the home on a daily basis to ensure people's rooms and communal areas are kept clean and tidy. However, standards of hygiene in the kitchen area require improvement. The home was recently inspected by the food standards agency who issued a poor rating to the service as they identified issues relating to hygienic food handling and management of food safety. We discussed this with the manager who assured us steps were being taken to address the issues. We explained this is an area for improvement which we would expect the provider to resolve within the earliest possible time frame.

The environment is safe and maintained to a high standard. We saw evidence of a rolling programme of checks, maintenance and servicing undertaken by appropriately qualified trades people to ensure the home, its facilities and equipment is safe to use. We conducted a visual inspection of the home and did not identify any hazards. Substances hazardous to health are securely stored. Restricted areas throughout the home are locked and can only be accessed by authorised personnel. Access to the home is secure with visitors having to sign in before entry.

Leadership and Management

People are supported by a well-trained, experienced team of care workers. Staff turnover at the service is relatively low. Some care workers have worked at the home for a considerable amount of time providing good continuity of care for people. We examined records relating to staff training and found the service is mostly compliant with its training requirements. Care workers we spoke with told us the standard of training provided was good. The service operates a safe recruitment process. We viewed a number of personnel files all of which contained the required information to reflect people are safely recruited.

Staffing levels at the service are determined by the number of people living there and the level of their needs. We saw the service uses dependency charts to monitor the level of support people require. We looked at the rota and found it was consistent with staffing levels required. Care workers we spoke with explained the service can be very busy at times and dependency charts do not always give a true reflection of people's needs. We were told this sometimes has a negative impact on team morale. We examined records relating to supervision and appraisal and found not all care workers have received three monthly supervisions. We discussed this with the management team and explained this was an area for improvement which we will review at our next inspection.

There are systems in place enabling the service to reflect on its performance and identify areas for improvement. The Responsible Individual visits the service every three months and discusses service provision and other operational matters with people and care workers. On a six-monthly basis a quality of care review is completed and a report is published which sets out the services strengths and any identified areas for improvement.

Written information is available for people to view. We examined a cross section of policies and procedures including medication, safeguarding and whistleblowing. We found they are reviewed regularly and aligned with current national legislation and best practice guidance. Other written information we looked at included the services statement of purpose and user guide. Both documents are reflective of services provided at the home and contain all of the required information.

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
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36	The provider is not compliant with regulation 36(2) because not all staff have received supervision every three months.	New
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	New
73	The provider is not compliant with regulation 73(3). This is because the RI had not visited the service for a period of five months. The RI is required to visit the service at least every three months as stated in regulation 73(3).	Achieved

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