



# Inspection Report on

**Dyfan Court**

**Barry**

## **Date Inspection Completed**

19/09/2023

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## About Dyfan Court

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	01 October 2019
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 and their relatives are happy with the care and support provided at Dyfan Court. There are opportunities for people to take part in activities both at the home and in the local community. People are involved in choices and decisions that affect their lives. Personal plans are in place and are reviewed regularly. They are reflective of people's goals and ambitions, care and support needs, and how these are best met. Prompt referrals are made to healthcare professionals when needed.

People feel safe and enjoy good relationships with the care staff, who know them well. The service is well led by the manager, who is responsible for the day-to-day running of the service. Care workers are appropriately recruited, trained, and supervised. The Responsible Individual (RI) regularly makes himself available to people in the home and the staff team. There are effective systems in place to monitor the quality of care provided.

People live in a homely, warm, clean and comfortable environment. Each person's own room is personalised with their choice of décor, furnishings and possessions which are important to them. The home is well maintained and there are systems in place to protect people's health and safety.

## Well-being

People's physical, mental, and emotional well-being is considered and supported by the service. We saw reassurance and praise given to people throughout our inspection. The service works collaboratively with external agencies and professionals to promote people's physical and mental well-being. Care workers know people well and recognise changes in behaviour that may indicate a relapse in their health. Additional specialist support and advice is sought in a timely manner.

People have control over their day to day lives as much as possible. Personal plans are developed with people which encourages them to pursue their own goals and ambitions. Care workers support them to do what matters to them, including regaining their independence and trying new things. People told us they get on well with the care staff. There is good information available for care workers to understand how to best meet people's care and support needs. Records show that timely provider assessments, personal plans, risk assessments and reviews are completed.

Good systems are in place to protect people from harm and abuse. Staff recruitment is safe as pre-employment checks are completed prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. Care workers complete safeguarding training. Safeguarding policies and procedures are in place and the manager has a good understanding when a safeguarding referral needs to be made.

People are supported to maintain and build on relationships with family and friends. They are also supported to attend activities and groups of their choice in the local community. During our visit we saw people making plans with care workers to go out shopping and to participate in physical activity therapy with a health professional, whilst others chose to spend time relaxing in their room and communal areas.

The provider does not provide an 'active offer' of the Welsh language (this means being able to provide a service and documentation in Welsh without people having to ask for it). No one living in the service is a Welsh speaker at present, therefore there is no demand to deliver a service in Welsh. The provider has access to translate key documents when needed and recruitment of Welsh speaking staff would be prioritised, should the demand change in the future.

## Care and Support

People receive care and support as and when required. Care workers undertake training relevant to the people they support and say this provides them with a good understanding of their roles and responsibilities and the best ways to support people with different needs. Person centred care is provided by care workers that are respectful and engaging. Care staff know people well and have developed positive and trusting relationships with them. Some people are not always able to verbally express their needs and wishes clearly, so support arrangements include information regarding their preferred ways of communication.

The service ensures people can discuss and understand decisions that impact their lives. Care plans ensure people are as independent as they possibly can be, with the emphasis on what people can do, their wishes and aspirations. Where possible people are involved in developing their care and support plans. There are care plans for all aspects of individuals' physical, mental, and emotional wellbeing. Detailed risk management plans are in place which enable staff to understand how best to support people at different times of need. We saw that people who are unable to make decisions about their care, support, and accommodation themselves have appropriate Deprivation of Liberty Standard (DoLS) authorisations in place.

People can do the things that matter to them when they want to do them. We saw there are a range of activities available which are meaningful to them. People told us they enjoy taking part in a variety of activities both within the home and in the community. Photographs are on display of people undertaking and enjoying activities that matter to them.

There are clear procedures in place to support the safe handling of medicines within the service. Care workers support people with their medication, which helps to maintain their health. Appropriate assessments are in place to support this such as PRN ('as needed'). Medication administration records (MAR) are completed, and regular medication audits are completed.

Policy, procedure and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE and follow correct procedures. The home is very clean and tidy. Staff maintain appropriate standards of hygiene.

## Environment

People feel comfortable, because they are cared for in a pleasant environment, which overall supports and encourages their well-being. The home is a bungalow which is bright and airy with ample communal and private spaces. There is an open plan living, kitchen and dining area with plenty of seating for communal eating if people choose. The home is clean and tidy. People's bedrooms are personalised and spacious. People are involved in maintaining and decorating their rooms. People's artwork and photographs are displayed around the home. The garden is well maintained and there is seating for people to spend time outdoors. People say they are happy living at Dyfan Court.

The building is well-maintained and safety checks are completed when required. Processes are in place to ensure the property is safe and maintenance issues are responded to promptly. Heating and electrical systems are checked annually, and a fire risk assessment has been completed. Care staff conduct daily, weekly, and monthly checks on the environment and regular fire drills are completed. There are personal emergency evacuation plans (PEEPS) in place for people. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002.

People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and record their visits in the visitors' book when entering and leaving. Care records and employee personnel records are kept securely and only available to authorised care workers. Records are securely stored in a locked office.

## Leadership and Management

Overall, the provider has a clear vision of the support it wants to provide, and a positive regard to each person in the home. The Statement of Purpose (SoP) provides a clear description of the service and what people can expect. The Manager is involved in the day to day running of the service and is described by staff as very supportive and approachable. During the inspection we saw that the manager has an open-door policy for staff and people living at the service with people calling to the office throughout the day.

Care workers feel valued and are passionate about the work they do. They are suitably recruited, trained, and supported to carry out their roles and responsibilities. The service follows safe practices for recruitment and supports care staff to register with Social Care Wales (SCW). Care workers have good opportunities for learning and development and speak positively about their opportunities to develop. Care staff receive regular support and supervision sessions. This enables them to discuss their roles, any areas of identified need, as well as opportunities for progression and development. Team meetings take place regularly to inform care staff of service delivery, and to discuss any concerns.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. All care records clearly state any risks to people's well-being and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager but would also contact external agencies such as the local safeguarding office if they thought they needed to.

People can be assured the service provider and the management team monitor the quality of the service they provide. The RI visits the home regularly and meets with people and staff. We viewed the latest quality monitoring report, which showed people's feedback. Recommendations for improvements were included and implemented. We saw evidence the RI has oversight of the service, and the manager conducts quality assurance system monitoring to ensure quality care is delivered. Policies and procedures are in place to fulfil the aims of the statement of purpose; however, some have not been reviewed to ensure they remain accurate.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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