



## Inspection Report on

**Duffryn Ffrwd Manor LTD**

**Duffryn Ffrwd Manor Ltd  
Old Nantgarw Road Nantgarw  
Cardiff  
CF15 7TE**

## **Date Inspection Completed**

22/06/2023

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## About Duffryn Ffrwd Manor LTD

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Duffryn Ffrwd Manor Limited
Registered places	92
Language of the service	English
Previous Care Inspectorate Wales inspection	31 <sup>st</sup> October 2022
Does this service provide the Welsh Language active offer?	This service is not working towards a 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Overall people receive a good service from staff who understand their needs. Staff appear kind and caring and people speak highly of the support provided. Systems in place ensure medication is stored and administered safely. Personal plans and risk assessments are detailed and benefit from regular reviews. There are opportunities for people to take part in activities. The environment benefits from an ongoing refurbishment programme and appears clean and homely.

Pre-employment checks are completed prior to staff commencing their role. Equipment is in good working order and is serviced as required. Staff receive training to help them carry out their work safely and efficiently and supervision is offered on a regular basis. Up to date policies and procedures support good practice. Not all staff feel supported by the management team and staffing levels require further consideration. The Responsible Individual (RI) is visible within the service.

## Well-being

People have a choice about most aspects of their care. People can choose where to spend their time and staff strive to support individual preferences and routines. The legal rights of individuals are recognised and supported. Daily choices are offered around activities and menus. The service encourages people and relatives to provide feedback around the care they receive. We noted some people in the nursing unit are not always supported from bed at a time of their choosing due to staffing numbers.

People's physical, mental health and emotional well-being is supported. People are treated with respect and dignity, and staff respond to requests as quickly as they are able to. People tell us they receive positive care. There are opportunities for people to socialise, engage in activities and maintain relationships with family and friends. Staff have access to personal plans which are detailed and person centred. Referrals to health and social care professionals are made in a timely manner. Staffing levels in the residential unit appear sufficient however staffing in the nursing unit requires further consideration to support timely interventions.

The environment is suitable. The service benefits from an ongoing refurbishment plan and appears well maintained. Environmental building checks are completed and documented routinely. There are several communal areas to support activities and social experiences. People's rooms are decorated to a good standard and personalised to reflect individual tastes.

People are protected from harm as there are systems to safeguard them. Staff receive training in how to recognise and report abuse. There are systems in place to identify, record and report incidents. A range of policies support positive practices and staff appear motivated to provide good quality care and support. All staff are confident in reporting concerns to the management team however some staff in the nursing unit feel issues raised are not always dealt with in a timely manner.

## Care and Support

People have access to a range of social activities. Individual daily activity records evidence both group and one to one activities take place. People tell us they enjoy the range of activities on offer and are encouraged to celebrate seasonal events. We saw people enjoy their lunch time experiences and noted tables are nicely decorated. Records and observations on the day evidence people enjoy regular visits from relatives and friends.

People and relatives feel the care provided is of a good standard. We saw care staff engage with people in a calm and patient manner and observed a number of interactions where staff used touch such as handholding to provide reassurance and comfort. People told us they feel supported by care staff comments include:

*"I am well looked after; they take good care of me"*

*"I love it here; they are very good"*

*"They are outstanding", "they do a good job" and "I am well cared for"*

*"It's a good home to be in; I have everything I need"*

Relatives told us they feel welcome when visiting the service and benefit from receiving regular updates on changes or events. Comments include:

*"They have been fantastic"*

*"They keep us updated and take good care of mum".*

*"I can't fault them".*

*"Staff are very caring; they cuddle mum which she really likes".*

*"They have been excellent", "Staff are caring and loving".*

Overall people receive positive care and support. Personal plans and risk assessments provide staff with information on people's support needs. Plans are reviewed regularly and daily notes and charts evidence people receive the care required. Records we viewed evidence the service works with a variety of health and social care professionals and referrals are made in a timely manner. Deprivation of Liberty Safeguards (DOLs) are completed to ensure any restrictions are minimal and least restrictive. Dietary needs are considered and people spoke positively about the quality of food provided. Some staff report pureed meals lacked variety and seasonal menus could be improved. The lunchtime meal we saw looked appetising and of a good standard. On the day of inspection, we observed some people not supported from bed at their preferred time and experiencing delayed medication and provision of breakfast. Staff report people's experiences varied depending on staffing levels on the day. We advised the service this is an area for improvement, and we would expect them to take action in a timely manner.

Medication management at the service is safe. Staff receive medication training. Medication administration records show people receive medication from care staff as required. Records of daily room temperature checks were seen and medication is stored securely.

## Environment

The environment is safe and secure. The service has effective systems in place to prevent unauthorised access. The service carries out routine testing and all serviceable equipment is checked to ensure its safety. A maintenance person has been appointed to undertake regular building maintenance and checks. All substances hazardous to health (COSHH) are stored correctly. People living in the home have a personal emergency evacuation plan to guide staff on how to support them to leave safely in the case of an emergency. The service has been awarded five-star rating from the food standards agency which means that hygiene standards are very good. We saw good supply fresh food in the kitchen and the kitchen manager report a sufficient food budget in place.

The environment supports people's well-being. Bedrooms are personalised with people's possessions such as photos, ornaments, and flowers. There are a number of bright communal areas and large gardens for people to sit and chat or join in a range of activities. Call bells are located within easy reach to allow people to alert care staff when they need help. An ongoing refurbishment programme is in place, we saw recent work had been carried out in the nursing unit including new flooring and painted walls.

## Leadership and Management

There are systems and processes in place to monitor how the service performs. We are told the RI, directors and managers have a visible presence within the service. A range of policies and procedures support day to day operations. We saw evidence of regular monitoring and auditing of day to day practices. The RI undertakes regular quarterly visits to ensure the views of staff, people and their representatives are gathered and the service considers the quality of care provided on an ongoing basis.

People are supported by care staff who are recruited safely, have access to training and regular supervision. Recruitment checks ensure staff are of good character and hold the necessary skills and qualifications to undertake their role. All care staff are registered with Social Care Wales (SCW) the work force regulator. The training matrix viewed and feedback from staff evidence care staff have access to routine core training and newly appointed staff benefit from a structured induction period. Staff we spoke with in the residential unit confirm they receive training suitable for their roles. While in the nursing unit some staff felt they would benefit from additional dementia and behavioural training. We discussed this with the RI and senior management team who confirmed they are exploring these requests.

Care staff do not always feel supported and staffing levels require strengthening. Staff on the residential unit feel staffing numbers are appropriate and they are well supported by their manager. They confirm feeling confident in reporting concerns, comments include *"The manager is really supportive"* and *"the team and manager are lovely, everyone is helpful"*. Staff on the nursing unit report concerns raised to the management team are not always actioned or given full consideration. Staff report at times there are insufficient staff on duty to enable them to spend time and respond to people as they would like. Comments include *"we are chasing our tails all day"* and *"staffing levels are not very good"*. We discussed these areas with the RI and senior management team who advised they are aware of the issues raised and are in discussion with staff to resolve their concerns.

### 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
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21	People do not always receive timely support.	New
36	The service does not provide access to regular supervision sessions or key areas of core training.	Achieved
16	The service does not evidence consultation with people and relatives when undertaking reviews.	Achieved
44	The service does not safeguard people from unauthorised access.	Achieved

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