



Inspection Report on

Dyffryn Support Agency

**Dyffryn Care
The Grange
Grange Road
Rhyl
LL18 4BY**

Date Inspection Completed

Date_Last_Inspection_Completed_
23 November 2021

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About Dyffryn Support Agency

Type of care provided	Domiciliary Support Service
Registered Provider	Dyffryn Support Agency limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the service's first inspection since becoming re-registered under RISCA
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

The provider ensures people's well-being is the focus of the care provided. People's needs are met by care staff, who are caring and focused on the people they care for. The management team are approachable and passionate about the service and the quality of the care provided. They take steps to oversee and ensure this is of a high standard.

Well-being

People have control over their day to day lives. We spoke with two family members who told us they are happy with the care their relatives receive; they feel the care and support provided by care staff is kind and respectful. We reviewed three care files, which evidenced planned care for individuals, which considers appropriate risk assessments around individual need. We evidenced management and care staff working closely with partner agencies, to ensure individual choices and care needs are met. The care is provided within several houses, which are people's homes.

People are encouraged to be as healthy and active as they chose or can be. The care provided is planned and focused to people's individual choices and need. People are encouraged and supported to have positive daily routines. Care staff are effective in communicating information, on behalf of family, friends and professionals. Management ensure people receive timely care, support and links to health professionals.

People are protected from harm and neglect. Care records we viewed showed they are updated in line with requirements, and when/if people's care needs change. We evidenced timely action taken to prevent risk of harm when people's care needs change. Care staff and management told us they know what to do if they have concerns for someone and are trained in safeguarding protocols. Care staff records and the service training programme show they are trained within required timeframes. We found effective communication about safeguarding concerns to appropriate agencies including Care Inspectorate Wales (CIW) and Local Authority (LA).

We found care staff are experienced and skilful in supporting people to do what matters to them. Care staff told us they felt well supported and trained. Management have efficient oversight of the training and supporting of care staff.

We saw people knew care staff well. The care we observed and care records indicate consideration has been given to people's routine and contact with family and friends. Records also indicate consideration has been given to ensure people are safe. All care staff follow infection control requirements, in view of the pandemic.

Care and Development

We viewed a sample of personal plans, which are well organised, detailed and up to date. Where possible, people, family and professionals are involved in the development of individual's care plans. Care records show people and their families' wishes and beliefs are considered and supported. Care records indicate people are supported to be as independent as possible. We observed a sample of care staff with people and found them to be kind and focused on individual need. Care records show care staff record accurately and clearly. These records show detail of how people are assisted with everyday life, including, meals and getting around the environment.

The care people receive is of a good quality. Care is planned around individual need and routines. The care records we viewed are well organised and up to date and reflect the care provided. We reviewed individual risk assessments, which were detailed and based on individual need. We evidenced appropriate links are made to a variety of health professionals for advice and support or if health needs change. We observed a sample of care staff use a variety of approaches when tending to people's daily routines and health needs.

People access to health and care professionals efficiently. We observed one care staff link with professionals in regard to a person's health needs. We spoke with two care professionals, who told us care staff and management are effective in timely communication about people's care needs. We viewed a sample of electronic correspondence between management, care staff and health professionals; this showed effective and ongoing communication.

The service is effective in promoting hygienic practices and the management and prevention of infection. We evidenced appropriate and up to date policies for infection control, which are updated when guidance changes. The training matrix showed care staff are provided with training in this area. Management told us, they are "*proud of the fact they have kept the virus away*" from the people they care for.

There are safe medicine management procedures in place. We reviewed the service medicine policy, which is regularly reviewed and updated. We found care staff have training in medicine management. We viewed a sample of care staff files which showed they achieve competencies in medicine management and are observed by senior care staff before administering medication. There are systems in place for care staff and management to check medicine is administered correctly.

Leadership and Management

The service provider ensures efficient governance arrangements to support the delivery of a good quality service. The sample of policies and procedures we viewed are in line with the up to date Statement of Purpose (SOP). The personal plans we viewed show thorough pre assessment of people's needs before they receive a service. We also found evidence of improvement in people's levels of need due to the positive effect of the care provided.

There is an effective and timely system for monitoring people's care records which are altered if/when people's care needs change. People and their families are happy with the care provided. Professionals report effective communication; one professional said, *"the management team work well together to ensure important information is shared with the right people and professionals"*.

There is sufficient staffing and measures in place to ensure staff are sustained and recruited. The care files we viewed show safe recruitment of experienced staff. The files also evidence training provided by care staff. We viewed the training programme which was consistent with the care staff files we viewed. This indicates care staff receive regular, ongoing required training. We found face to face training is planned to increase during 2022; which on the whole, is better quality than online training.

The service provider has effective oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people and staff to be safe. The provider invested in the office as a base for the service. We evidenced weekly review of service finances. This demonstrated further investment if profits are made. We saw the monthly monitoring documents demonstrated recruitment of staff. Audits of service finance show plans for efficient financial management.

The service providers have appropriate arrangements in place to notify relevant regulatory bodies and statutory agencies, where there are concerns and significant events affecting individuals. Care Inspectorate Wales (CIW) receive timely and appropriate notifications in addition to sharing information with the inspector when required. We reviewed the service copy of incidents which are consistent to records notified to CIW. We found efficient and appropriate actions taken by the service provider in response.

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	N/A

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