

Inspection Report on

Eryl Fryn Nursing Home

Eryl Fryn Bodafon Road Llandudno LL30 3BA

Date Inspection Completed

14/05/2024

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About Eryl Fryn Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Minster Care Management Ltd
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	13 October 2023
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

This was a focused inspection to establish if the areas of noncompliance identified at the last inspection relating to the environment and leadership and management have been met.

The Responsible Individual (RI) visits the service regularly in line with regulatory requirements and there are several robust quality assurance monitoring systems in place. Improvements have been made at this inspection and the service provider is now compliant with the regulations. The home is warm and welcoming, and improvements have been made to the environment which- is safe and meets their needs. There is ongoing investment in the refurbishment of the building and external grounds.

People are happy living at Eryl Fryn and have good relationships with the care staff who support them. We saw there is a good rapport between people and staff and people are treated with dignity and respect. People are encouraged to be as independent as possible and to live their lives in their preferred way. Care staff provide care with patience, kindness and visitors we spoke to supported this.

Well-being

As this was a focused inspection, we have not considered this theme, in full.

Whenever possible, people are supported to have control over their day-to-day life. There is a variety of activities for people to engage in and we many examples of staff supporting and encouraging people with their diet and fluids. Staff are very kind, happy in their work and caring towards people. There is a positive culture throughout the service which focusses on providing people with good standards of support to ensure they remain independent. We saw warm tactile touch used to reinforce the feeling of warmth and belonging. We saw people exchanged banter with staff, and that care staff know people well. We saw people having visits from family and saw pictures of events where family and friends had also been involved.

People are supported in an improved environment. Health and safety building compliance checks are completed and documented routinely. Regular audits of the environment are carried out to ensure the service is safe. The service was warm, clean, and homely. All areas of the home are clear of trip hazards so that people could safely walk around. The outside area has undergone some works, and a fence has been erected to safeguard people. The refurbishment of the parquet flooring has been completed and there is a refurbishment plan in place which is ongoing.

People are safeguarded and protected from harm. We saw people's body language and expressions indicated they felt safe and secure around the care staff who support them. The home was secure with a signing in book for visitors to sign. Deprivation of Liberty Safeguards (DoLS) are in place for people who do not have the capacity to make decisions about their accommodation, care, and support. There is good infection, prevention and control practices throughout the home.

Care and Support

As this was a focused inspection, we have not considered this theme, in full.

People's well-being is promoted. People have an opportunity to take part in different activities. They can choose group or one to one activity and are encouraged to celebrate events throughout the year. People enjoy board games, jigsaw puzzles, arts and crafts and people have recently planted flowers in the flowerpots and strawberries. A visitor told us they participated with other people in the recent exercise class and how much fun it was for everyone. People enjoy a social occasion at mealtimes, tables are laid nicely with flowers, table clothes and cutlery. The home smelt of home cooking and people looked forward to their lunch that day. The cook prepares a balanced and homely meals and knows people's preferences and diet types. A hairdresser visits the home every two weeks and people look forward to this.

Environment

As this was a focused inspection, we have not considered this theme, in full.

People feel valued by an improving environment which helps to reinforce a sense of identity and personal worth. The home is set over three floors and has ample communal spaces including lounges which enables people to spend time together or to receive visitors in private. The small kitchen area in the dining room has recently been refurbished since our last inspection. People are encouraged to eat in the dining room which had nicely set tables, overlooking the picturesque garden and spectacular views over Llandudno Bay. Some bedrooms have undergone repairs and decoration, and new flooring has been laid on the ground floor corridor. The parquet flooring throughout the ground floor has been sanded and vanished and general decoration has taken place since our last visit.

The outdoor space and grounds are safe with good quality garden furniture for people to spend time comfortably outdoors. On arrival we found the main entrance secure, and we were asked for identification and to sign the visitors book before we were permitted entry. A fence has recently been erected to ensure the safety of the people and external paths have been cleared of all trips and slip hazards. The home is warm, welcoming, and decorated nicely throughout and we saw evidence of ongoing redecoration and refurbishment of the fabric of the building. A maintenance person is employed to address any day-to-day issues in the home. There are good systems in place to identify any concerns which require attention and we saw evidence any repairs are generally completed swiftly.

Leadership and Management

As this was a focused inspection, we have not considered this theme, in full.

Arrangements are in place for the oversight of the service, through ongoing quality assurance processes that review standards of care. These assist the manager in identifying good practice and areas for development to help drive best care practices. The manager of the home is accessible to residents, family, care staff and has an open-door policy. We saw the RI visits the service frequently and speaks with people and staff and the area manager visits weekly. Audits are completed on various aspects of care and analysed monthly to safeguard people against poor practice and neglect. Quality assurance monitoring takes place regularly and includes seeking the views of people living at the service and their relatives which indicates that the provider is committed to providing a quality service and making improvements where required.

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	
53	The service provider has failed to take timely action to address issues raised at the previous inspection with the security and ease of access to the front garden for people with mobility, sensory or cognitive impairments. The provider must ensure timely and appropriate action is taken to address this as a priority.	Achieved	
44	The service provider has failed to adequately address issues previously identified by CIW as requiring improvement. The provider must ensure the home is maintained properly, is free from hazards to health and safety and of sound internal and external construction.	Achieved	

66	The RI has failed to adequately demonstrate their capacity or capability to ensure the provider fulfils the Statement of Purpose and is compliant with the regulations. The RI must demonstrate adequate	Achieved
	oversight of the service provided.	

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	
73	The RI has not demonstrated sufficient monitoring of the service to ensure it is delivered in line with the Statement of Purpose. The RI must demonstrate they are speaking directly with a selection of people and staff, conducting an adequate inspection of the premises, and reviewing a selection of records of events and/or complaints during their visits to site.	Achieved	

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