



# Inspection Report on

**Eryl Fryn Nursing Home**

**Eryl Fryn  
Bodafon Road  
Llandudno  
LL30 3BA**

**Date Inspection Completed**

13/10/2023

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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	
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

The home is warm and welcoming. People told us they like living here and feel safe and well cared for. Care workers in the home have a good rapport with people they support and provide kind and attentive care to people following personalised plans for their support. Plans are reviewed regularly and updated as changes occur. People have timely access to health care advice and have visitors throughout the day. People enjoy participating in a varied programme of activities in the home and can express their opinions about how the service could be improved.

The service provider has governance systems in place to support the smooth running of the service. There are appropriate numbers of trained staff in the service, who told us they feel well-supported by the manager. The Responsible Individual (RI) has failed to ensure they are meeting the requirements of their role. Timely action has not been taken to address areas of non-compliance raised at the previous inspection and further non-compliance has been identified at this inspection.

## Well-being

People have some control over their day to day lives. We saw people are supported to spend time where they want throughout the day. People can choose to eat meals in their rooms, the dining room, or the lounges. People told us staff do what they ask them to do and care workers “*go above and beyond*” to meet their needs. People can choose from a range of menu options for their meals; we saw people enjoy the food in the home, which smelt and looked appetising during our inspection. The service provider gathers feedback from people and their relatives about their care experiences to support the development of the service.

People are supported to do things that make them happy and keep them healthy. Records show people receive timely access to healthcare and social care advice when required and this is followed by care workers. There is a coordinated programme of leisure activities people told us they enjoy participating in. Records show people are supported to do one to one leisure activities if they prefer. People told us they enjoy participating in quizzes and wine and cheese nights. We observed an armchair exercise class on the afternoon of our visit to the home. The service currently provides bilingual posters, but more significant efforts to promote Welsh language and culture would benefit people’s well-being in the home. We discussed this with the manager, who is looking for ways to improve this further.

People are protected from abuse and neglect in the service. People told us they like living in the service and feel safe there. Care workers we spoke to were confident raising issues with the manager and records show they receive the training they need to keep people safe. The manager monitors records of events and care provided, through routine audits, to identify patterns and address issues in a timely manner as they arise.

People live in accommodation which does not fully support their well-being. We saw equipment in the home to support people’s care needs is maintained and checked appropriately. Records show the correct routine health and safety checks are carried out and suitable infection prevention and control measures are in place. However, there are ongoing issues with unsatisfactory decorative repair in communal areas and a lack of safe and secure access to the garden which are placing people’s well-being at risk of harm.

## Care and Support

The manager conducts a thorough assessment of whether the home can meet people's care and support needs before confirming they can move in. People's personal plans are written using information gathered from professional assessments, talking to people and their relatives, and through individualised risk assessments completed by the home manager and nursing staff. Personal plans we saw contained suitable detail and instruction for care workers to follow. They are updated regularly to ensure they reflect people's current needs and include the latest advice from any relevant visiting professionals. We found some information the home holds about people's preferred routines and life history, including their hobbies and interests, is not consistently transferred into relevant personal plans. We discussed this with the manager who told us it will be addressed. Care workers support people to maintain a smart, well-dressed, and well-groomed appearance. People told us they receive good care and support; people told us "*They look after you so well*" and this was supported by feedback from relatives we spoke to. Records of people's daily care and support received show people are supported in line with their personal plans.

We saw people relaxing and enjoying socialising together and with visitors throughout our visit. People have a good rapport with care workers in the home, who support people in a friendly and dignified way and are kind, and attentive. People celebrate special occasions like birthdays in the home, and we heard staff singing and celebrating with people during our visit. We also saw people can participate in a programme of group activities coordinated by staff in the home, including quizzes, bingo, and cheese and wine tastings. Families and visitors are encouraged to participate also and people told us they enjoy the variety of activities on offer. Records show that people also receive one to one support with leisure activities if they prefer. There are bilingual posters promoting events and activities in the home. Some residents speak Welsh but told us they do not get to speak it much. The manager told us they are looking into ways to increase incidental use of Welsh as part of people's day to day care and support.

The provider has systems in place to support safe medication management and administration practices in the home. We found appropriate training updates and competency checks for delegated staff and policies and procedures in place for them to follow. There are infection prevention and control policies and procedures in place to keep people and visitors safe in the home. We saw staff using appropriate personal protective equipment (PPE) during our visit.

## Environment

The home is warm and has a welcoming atmosphere. People's rooms are furnished appropriately for their needs and we saw people are able to personalise them with pictures and ornaments they bring into the home. The communal areas provide enough space for people to socialise in larger and smaller groups as they please. We saw the dining area has tables of different sizes, with tablecloths, place settings, napkins, cutlery, and flowers for mealtimes providing a sociable dining experience. We saw decorative and period features in the dining room are in a poor state of repair of which prevents people having a fully dignified and pleasant dining experience.

At the last inspection we identified multiple areas in the home that required improvement in decoration and repair. At this inspection we found some of these problems have not been resolved and we also identified new areas requiring action. The lack of adequate and timely action by the provider is still placing people's dignity and well-being at risk of harm and we have therefore issued a priority action notice. The provider must take immediate action to address these issues.

People told us they liked living in the home and praised the "*beautiful views*" of the gardens and coastline from communal rooms. At the last inspection, a lack of safe and secure access to the garden for people with mobility, sensory or cognitive impairments was identified as requiring priority action by the provider. The service provider has failed to take timely action to address this and it is still impacting on people's wellbeing and placing them at risk. Where providers fail to take priority action, we will take enforcement action.

The service provider ensures appropriate amounts of equipment and facilities are available to meet people's needs, including in the laundry and bathrooms. Records show there is regular servicing and maintenance checks done for all equipment in the home. Routine health and safety testing and certification for fire, electrical and water supplies are well documented in the home and there are relevant policies and procedures for staff to follow. We saw evidence that staff receive appropriate training in health and safety matters. People's current Personal Emergency Evacuation Plans, (PEEPs), are easily accessible in the event of an emergency. The service provider does not currently use bilingual and pictorial signage in the home as part of their efforts to promote Welsh language and culture.

## Leadership and Management

The service provider has governance systems in place to support the day to day running of the service and to monitor the quality of care provided. There are policies and procedures to guide care workers. Records show the manager completes routine audits of how different aspects of the service delivered in the home and takes prompt action to rectify issues identified. The manager ensures regulatory bodies are notified in a timely way about relevant issues. We found a lack of satisfactory evidence the RI is fully meeting requirements of their regulatory visits to monitor the service delivery. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

People and their relatives or representatives have opportunities to give feedback on their experiences in the home. This information and the findings of the RI's regulatory visits are used to produce a written report for the service provider on what is working well and suggested improvements needed. We found the reports shown to us lacked analysis of feedback from people and from professionals. The reports lacked evidence of adequate analysis and action planning following the findings of monitoring visits by commissioners and the last inspection by CIW. The RI has not demonstrated adequate oversight of the home to ensure the service is delivered according to the Statement of Purpose. They do not take the timely action required to address non-compliance with the regulations. This places people at unnecessary risk of harm to their health, safety and well-being and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Records show appropriate numbers of staff work in the service on each shift. The provider is actively recruiting to staff vacancies in the home and uses agency staff to cover gaps in the rota. The manager requests regular agency staff attend the service to ensure continuity of care for people. Records show staff receive the training required to meet people's needs and training compliance is monitored. The manager ensures new staff are fully vetted prior to working in the home and complete an induction. Records show the manager ensures care workers have current professional registrations and completes ongoing vetting checks for permanent staff to keep people safe. Records show staff are supported through staff meetings, appraisals and regular supervision with the manager or their line manager. Staff told us they like working in the home and feel well supported by the manager.

### 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
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 oversight of the service provided.	New
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.	Not 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	Not Achieved



	maintained properly, is free from hazards to health and safety and of sound internal and external construction.	
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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
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.	New

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