



Inspection Report on

Eryl Fryn

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

Date Inspection Completed

26/02/2021

Welsh Government © Crown copyright 2021.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Eryl Fryn

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Dove Care Homes Limited
Registered places	31
Language of the service	English
Previous Care Inspectorate Wales inspection	24 April 2019
Does this service provide the Welsh Language active offer?	No

Summary

People are encouraged to make choices and decisions whilst being protected from harm. People are supported by staff who promote independence and understand what is important to them. The environment is homely, secure and clean. The management team are approachable and visible within the home. People are happy with the care and support they receive. People's health needs are closely monitored and referrals are made to professionals in a timely manner. Staff are supported and trained in the work they perform.

Well-being

People are happy and cared for. We saw people positively interacting with each other and care workers supporting people in a caring and sensitive manner. We felt there were positive and sincere relationships and saw displays of genuine affection on both sides. Staff had a good knowledge of the people they care for and there are opportunities for people to have one to one support during mealtimes when needed. Staffing levels appear sufficient to meet the needs of people and are continuously reviewed as people's needs and levels change. People have a choice in relation to meals and are offered a different meal if they wish.

There are systems in place to protect people from abuse and neglect. People who lack capacity to make day-to day decisions are subject to Deprivation of Liberty Safeguards (DoLS). The service has a whistleblowing policy for staff to report any incidents which affect people's safety. The entrance to the home is kept locked and has an appropriate system where visitors are required to sign in and out. We found the staff and management team understand their roles in protecting people and they received training to recognise signs of abuse. Staff know how to report relevant concerns. We saw the management reacts promptly and appropriately to any incidents or changes. There is also risk assessments in place which identify people's vulnerabilities and the strategies for protecting them from harm.

People can influence their day-to-day care. We saw personal plans are person centred and detail people's likes and dislikes. People are offered choice as practically possible and make their own decisions on how to spend their time. There is a wide range of activities and people can participate if they wish to. The statement of purpose (SoP) is available for families to read and explains the services offered to people at the home. A quality assurance system is in place and staff and resident views are taken in to account. People's health needs are monitored to ensure their well-being and staff access professional advice and reviews when needed in a timely way. People can personalise their bedrooms with items of importance to them.

Care and Support

Choices of meals are available; the menu has a selection of fresh nutritious meals. Most people told us the food is nice and a choice is offered. Some people require their meals to be served at a specific consistency to minimise the risks of choking. People who required support to eat are assisted in an unhurried and discreet manner which helps preserve their dignity. Some people need to have their food and fluids monitored to make sure they received sufficient diet and fluids. Care staff record their intake on food and fluid charts. The quality of these records are mainly good however, we did see some gaps where care staff had not recorded what one person had drunk and eaten. The manager was aware of this and had already addressed the importance of documentation with the care staff.

Care staff demonstrate a good understanding of the needs of people as well as knowing their wishes and choices. This helps care staff to deliver care and support effectively. Staff monitor people's health and wellbeing and are able to quickly observe changes in people's presentation. The home has a cheery and positive atmosphere. People are engaged in their own routines, which include watching television, chatting and regular planned activities with the activities co-ordinator/staff member. People benefit from regular interactions and engagement with staff. It is clear staff have taken the time to get to know people, their interests, likes and dislikes. This helps staff engage people in conversation which is meaningful to the person.

People get the care they require, as and when they require it. Personal plans are person centred and contain details about the person's preferences and choices. These are clear and give detailed information to staff on risk and what to do to mitigate risk. For example, there are directions on how to assist people to move safely and how to keep people's skin from breaking down. We saw staff using appropriate equipment to assist people to move safely. People at risk of tissue breakdown have the appropriate cushions to help relieve pressure and keep their skin intact. Assessment tools are used to assess care needs such as pressure prevention damage and falls. Referrals were made to other health professionals within a timely manner.

There are mechanisms in place to safeguard people vulnerable people. Records show the provider has safeguarding policies and procedures, which are aligned to current legislation and national guidance. People said the care staff were great, they have fun and they were treated with dignity and respect. The provider ensures that people are informed of their right to independent professional advocacy services.

Environment

People live in a safe environment. Care staff are knowledgeable about the use of Personal Protective Equipment (PPE) and were observed to be using it correctly. PPE stations are located throughout the service. The provider maintains good stock in case of an increased usage. Staff have complete the necessary infection control training for keeping people safe during the COVID-19 pandemic. E-Learning and practical demonstrations are used to good effect to remind staff about the necessary handwashing and the correct use of PPE. Staff demonstrate good knowledge about infection control, and we could see that they have put the principles of infection control into practice.

People benefit from living in a calm, clean and friendly environment. Whilst maintaining good levels of homeliness, the environment is adjusted to ensure social distancing. Additional cleaning is being carried out by domestic staff of frequently touched areas, such as door handles, switches and handrails which reduces the risk of cross contamination. People's rooms are decorated in line with their individual needs and preferences. We saw photographs and other items on display in rooms which held sentimental value. Records show that there are systems of monitoring and auditing in place, which supports a planned maintenance schedule and renewal programme for the fabric and decoration of the home. The manager told us, and we saw the home has and still is undergoing investment and improvements.

Leadership and Management

People benefit from the leadership and management in place. There are sufficient policies and procedures in place to enable staff to safely carry out their roles. We saw evidence the management team carried out audits in areas such as falls, pressure ulcers and environment checks. The manager has regular contact with the management team and although the responsible individual (RI) was unable to visit the home there was evidence of regular contact with the RI. Quality assurance systems are in place and covered areas such as care planning documentation, accidents/incidents, medication management and the overall environment. It includes consultation with staff and residents and any other actions required to improve the service. However, we felt this would be further enhanced by producing a Quality of Care review report.

People can be confident that they are supported by staff who are well trained and safely recruited. Three staff files seen, confirmed there is an effective recruitment and selection process in place. Staff have completed an application form, provided references, proof of identity and have been subject to a criminal records check before starting work. People told us and we saw, there were enough staff available to meet their needs. The staffing levels are kept under continuous review. Staff receive training required to effectively and safely care for people. We saw staff training certificates and there are clear systems in place to manage staff training and development. A training spreadsheet evidenced mandatory training was up to date. In addition, staff have access to a range of training based on the needs of the needs of people living in the home such as diabetes and managing skin integrity.

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None	
------	--

Areas where priority action is required

None	
------	--

Areas where improvement is required

None	
------	--

Date Published 29/04/2021