



# Inspection Report on

**Vyrnwy Nursing Home**

**Vyrnwy Nursing Home  
Llansantffraid  
SY22 6AU**

## **Date Inspection Completed**

**06 December 2021**

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## About Vyrnwy Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Sure Care (UK) Ltd
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

This was a focused inspection and on this occasion we did not consider the environment, care and support and leadership and management in full.

People are happy with the care and support they receive. Care staff are kind and show they want to give people the best care and support they can. Staffing numbers have increased allowing people to get care and support when they need it. Care staff feel they have more quality time to spend with people and do not feel they are rushing to meet people's needs.

Improvements are being made to the environment to benefit people living at the Vyrnwy. Quality assurance processes in place mean people can give their views on the service and improvements can be made to ensure people's personal outcomes are met.

## Well-being

People have control over their day to day life. People told us their choices are respected including where they spend their day, what activities they do and what they have to eat and drink. We saw people spending time in their bedrooms, the lounge and being supported to move freely around the home. Records show people are involved in reviewing their personal plans making sure they contribute to decisions which affect their life. The responsible individual (RI) meets with people when they visit the home giving them the opportunity to share their views on the service.

People are supported with their physical health and mental well-being. Increased staffing levels means care staff have more time to spend with people to make sure their needs are met in a timely way. Family and friends are encouraged to visit within the current government guidelines for visits to care homes. Without exception, people speak highly of the care staff who we saw are kind and caring.

People live in an environment which supports their needs. Improvements are being made to the environment to benefit people and make sure they have choice how they want their needs met.

## Care and Support

As this was a focused inspection, we have not considered this theme in full. The management team consider a range of information about people before they move into the home. New documentation is being put in place to make sure assessments are routinely reviewed and updated when needed. This will be considered in full at the next inspection. Records show people have the opportunity to be involved in reviewing their personal plans to make sure their personal outcomes are met.

People have the care and support they need when they want it. Since the last inspection, staffing levels have increased in the home. Records show there are consistent levels of staff on duty during the week and the weekends. The manager told us staffing levels are kept under review depending on the dependency level of people living in the care home. Care staff tell us this means they are able to spend more time quality time with people. Comments include *“it makes things less stressful”*, *“no need to rush care now”* and *“we have time to talk to people without rushing”*. People told us that care staff respond quickly when they ask for help. New equipment purchased including a hoist has reduced the time people wait for support.

People have choices about activities, menu options and daily routines. On the day of our visit, some people had gone out on a trip. Other community and home based activities are planned. Care staff were looking through photographs with one person which they were clearly enjoying. Another care staff member was gently guiding a person around the home allowing them to explore at their own pace. Family members speak positively of the care and support their relatives receive and feel confident any issues raised would be addressed by the management.

## Environment

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

Improvements are being made to the environment to help people achieve their personal outcomes. We saw new bilingual signage is in place to help with orientation around the home. New equipment including a hoist, digital weighing scales and a food trolley for upstairs have been purchased. The food trolley ensures people have their food at the right temperature. A new shower room is being installed upstairs to make sure people have a choice of bathing facilities. Bedrooms are being refurbished and further plans are in place to replace some of the flooring.

## **Leadership and Management**

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

There are good quality assurance measures in place. The RI visits the home and talks to people and care staff about their experiences. Records confirm this. The manager confirms she has good support from the RI and is in regular contact with them. Care staff tell us the morale is good, particularly now staff numbers have increased, allowing them to provide care to people without feeling rushed. Without exception, care staff told us they feel supported by the manager who they say is approachable, caring and listens to their views.





### 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
34	There is not always sufficient numbers of staff working at the service to make sure people's care needs are met in a timely way.	Achieved

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
18	Provider assessments are not kept under review and revised as necessary.	Reviewed
34	<ul style="list-style-type: none"><li>Staffing (Regulation 34. (1)). Numbers of staff on duty are not always in line with the SOP. People do not always have care and support when they need it.</li></ul>	Achieved
15	Personal plans do not evidence people are involved in preparing and reviewing them.	Achieved

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