



Old Vicarage Nursing Home



Old Vicarage Nursing Home, Dulais Fach Road, Tonna, Neath, SA11 3JW



01639 632553



www.oldvicaragenursinghome.co.uk

Date(s) of inspection visit(s): The inspection visits for this service took place between 31/07/2025 and 01/08/2025

Service Information:

Operated by:	Old Vicarage Limited (THE)
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care
Registered places:	42
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture, or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

The Old Vicarage Nursing Home is in a quiet, elevated location near shops and other amenities. It is a homely service that provides a calm environment for people to spend their days. People have many positive experiences which promote their health and well-being. Care staff have the required knowledge and skills to provide a consistently good standard of person-centred care and support.

The home has a good range of facilities and is generally well-maintained. However, storage systems must improve to ensure people are not exposed to hazards. People benefit from regular environmental upgrades.

The service has trusted leaders and managers who reinforce high standards of practice. Staff share the same values and feel supported in their roles. The Responsible Individual (RI) oversees the running of the home effectively, driving positive change when needed.

Findings:



Well-being

Good

The service promotes people's rights. Care staff communicate with people effectively and support them to make everyday choices. Managers deal with concerns about people's welfare in line with the Wales Safeguarding Procedures. Almost all staff are up to date with safeguarding training and feel confident reporting concerns. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure people do not face unlawful restrictions. We reminded the management team that CIW must be notified of all DoLS applications.

People receive good quality care which helps them stay healthy. Care staff assist people in a calm, confident and respectful manner. Medicines are managed safely and infection risks reduced as far as possible. People feel at home in their surroundings, although staff must be more vigilant in protecting them from environmental hazards. People have access to the health services they need and are encouraged to maintain a suitable diet. Care staff preserve people's dignity at mealtimes, providing encouragement and reassurance when needed. One person told us *"Food is marvellous, we've got decent cooks"*. Care staff deal with accidents and incidents appropriately, which the manager audits every month. We found inconsistencies in record keeping, as some records had not been kept up to date. The manager assured us this would be addressed.

Relationships within the service create a homely atmosphere and positive working culture. People have meaningful interactions with care staff. They told us *"They're all lovely... It is good to have a giggle"* and *"I had my nails done yesterday and one of the girls did my hair for me. They do spoil me"*. Staff celebrate people's birthdays and invite families to be part of home life. The RI plans to create a visual display outlining the staffing structure, which residents and families can refer to. Staff are content in their roles and proud to be part of a close-knit team. They said, *"It's a nice home to work in"* and *"It's like a family home – we all get on"*. Managers are committed to staff development. Staff told us *"They've brought me out of my shell"* and *"Definitely supported from work and personal point of view. I've recommended [the home] to others"*.

People have opportunities to take part in various activities, including music therapy, afternoon tea, pamper days, lawn games, waffle making and cinema experiences. One person told us *"The activities are good, will try them all. We did some exercises in the lounge; it was fun, quite a few of us did it. The ukulele band is good too"*. Two activity coordinators help plan and deliver the timetabled activities, with care staff carrying out other activities on an ad hoc basis. One-to-one activities are sensory-based, and we were told people particularly like audiobooks and visits from animals. Activity coordinators are currently collecting items to create a sensory garden.



Care & Support

Good

The service develops personal plans which provide an insight into who people are and what they want to achieve from their care and support. They capture people's social backgrounds, care preferences and routines, acknowledging how health conditions may affect daily life and how care staff can focus on people's strengths to promote independence. Personal plans are routinely reviewed, although need to be updated more promptly following new health advice, with input from people and/or their representatives. Nursing staff and keyworkers regularly consult people about their experiences and whether they need to make changes to their care and support. Staff told us the process works well but protected time to update records would be beneficial.

Care staff understand what is important to people, treating them as equal partners in their care. We observed people to be very well cared for and presented. One person told us *"They're looking after me very well. They are all gentle when helping me to wash and dress"*. Care staff receive updates about people's health and well-being during handover meetings and can review personal plans easily via an electronic care planning system. Care staff maintain good quality records about the care they provide, such as pressure relief and nutritional support. These show that personal plans are consistently followed. Daily recordings include colour codes to highlight how people are feeling.

The service has good links with medical and specialist services. Personal plans outline whether people require input from health professionals, including the dietician, Speech and Language Therapy (SALT) team, dentist, GP and continence advisor. Nursing staff consult with GPs every week regarding people's care, making additional requests if new concerns arise. The manager and care manager conduct monthly audits to assess standards of practice and identify trends. There are also plans to further promote the role of in-house champions for oral health and dementia care.

Medication is safely managed. The service has improved its control of stock and handling of medicines with the support of the Local Health Board's Medicines Management Team. People receive their prescribed medicines at the right time, although allergy information needs to be recorded on medication records more consistently. Staff responsible for administering medication are up to date with their medication training. They carry out regular checks to ensure medicines are stored at correct temperatures.

The home promotes a good overall standard of hygiene and infection control. Designated staff undertake domestic and laundry duties efficiently. Care staff assist with cleaning rooms and equipment after use and complete other cleaning tasks as part of their night duties. Training data shows that almost all staff are up to date with their infection control training. There are suitable arrangements in place for the disposal and collection of general and clinical waste. The service has a current food hygiene rating of 3 (generally satisfactory).



Environment

Good

The environment is constantly improving. The service has carried out significant refurbishment of the first floor, creating a fresh, bright environment that includes colour contrasts to help people orientate to their surroundings. We saw people socialising with care staff and watching television in a new dining and seating area. People have also benefitted from new bathroom facilities. The service has a handyman to carry out general repairs and upgrades. The provider, RI and well-being coordinator also support with redecoration. A maintenance plan has been developed to monitor the progress of renovations. Future work includes full refurbishment of the ground floor.

Private rooms are personalised and adapted to support people's care needs and preferences. Photo displays, televisions and light features are thoughtfully arranged to help keep people stimulated. Care staff support people's preferences as outlined within personal plans, using lighting and music to create a calm, soothing atmosphere. They also ensure people have access to call bells, drinks and other important items. People feel comfortable in the various communal areas, where they can relax, watch television, socialise or enjoy group activities. Information regarding upcoming activities is displayed in the entrance hall, along with people's art and craft work.

There is a large well-kept lawn to the front of the building, although the patio area has limited space. The garden includes some features of interest, such as a bird feeder and multiple flowerpots. A gazebo is available for use during parties and other events. The RI has identified ways to encourage people to spend meaningful time outdoors, which include introducing a gardening club and providing more seating and shaded areas.

Environmental hazards are putting people's health and safety at risk, and we expect the provider to make improvements. We found some rooms and other areas containing hazards to be accessible, as suitable locks were either not installed or being used correctly. These included a sluice room, laundry room, treatment room and storage room. Some items were also not being stored in line with the Control of Substances Hazardous to Health (COSHH) Regulations. The staff team need to be more vigilant in restricting access to hazardous areas and items which may cause people harm. The service also needs to continue its plan to refurbish and modernise the ground floor, as some furniture, furnishings and décor are worn and dated.

The service ensures equipment and utilities are properly maintained. Records confirm that moving and handling plus fire safety equipment is serviced and inspected as recommended. Personal emergency evacuation plans are available and easily accessible. The RI reviews the fire risk assessment annually and this is due to be renewed by an independent company. Fire alarm tests and drills are carried out periodically.



The leadership and management team has been strengthened by the appointment of a care manager, who supports with auditing and promoting best practice. The RI, manager and care manager are considered approachable, supportive and open to feedback. One relative described the manager as *“outstanding, really thorough”*. Staff also said, *“I could approach anyone”* and *“Approachable management team... Right balance between being professional and down-to-earth”*. Staff can easily access policies and procedures, which are aligned to current legislation and guidance. Information is shared and discussed during individual and team meetings. One staff member told us *“If there’s a problem, we tell them, and they try their best to sort it out... They really support you if something’s going on”*. The RI provides visible accountability and completes formal visits and in-depth quality-of-care reviews to assess standards. Action is taken based on the findings, which the RI intends to showcase via a ‘You Said, We Did’ board in the reception area.

Staff work effectively as a team to meet people’s care needs. Shifts are well organised as staff are allocated to work in areas based on their skills and experience. Care staff are visible to people and respond promptly to call bells. The call bell system has different alarm sounds and a colour coded display, alerting staff immediately to the type of response required. The service uses agency workers to maintain safe staffing levels, although staff absence has impacted on the workload and pressure faced by the team. Feedback from staff includes:

- *“Staffing levels short sometimes, have to pull together, backup option would be good.”*
- *“Despite struggles, we work as a team and get things done calmly.”*
- *“Staffing levels not great all the time, can become stressful... everyone works together so well that everything gets done quite efficiently.”*
- *“Only issue is being short staffed sometimes and the knock-on effect.”*

Staff sickness levels are reportedly improving due to an effective sickness policy. The RI assured us a dependency tool will be introduced to help determine whether staffing numbers need adjusting.

Staff have the knowledge and skills to provide good quality care. They go through an appropriate recruitment and vetting process, although the RI will audit staff records to ensure they contain all relevant information and documentation. Staff complete an induction programme which adequately prepares them for their roles. Managers support them to register with Social Care Wales and complete recognised care qualifications. The service provides mandatory and specialist training, as outlined in its statement of purpose. Nursing staff receive clinical training and supervision to support their professional practice. Opportunities for professional growth and development are identified during supervision meetings and annual appraisals. Staff told us *“We get refresher training... They give us prompts when due”* and *“If you want it, you can progress”*.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
Suitable locks are not always used/installed on doors leading to hazards and some rooms require refurbishment. The provider must ensure people live in an environment that is suitably furnished and equipped, and free from hazards as far as is reasonably practicable.	31/07/25

CIW has not issued any Priority action notices following this inspection.

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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