



Inspection Report on

Fairways Nursing Home

**Fairways Nursing Home
Lon St. Ffraid Trearddur Bay
Holyhead
LL65 2UD**

Date Inspection Completed

1 July 2022

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About Fairways Nursing Home

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| Type of care provided | Care Home Service Adults With Nursing |
| Registered Provider | Fairways Care Ltd |
| Registered places | 38 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | Manual Insert 5 July 2019 |
| Does this service provide the Welsh Language active offer? | Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture. |

Summary

Fairways Nursing Home is under new ownership and is undergoing a settling in period as there are new staff members and management also at the service. They have had a challenging time with maintaining staff numbers during the onset of the Covid-19 pandemic. New staff have been and are continuing to be recruited to ensure enough staff are available to give safe care. People spoken with are happy with the care given to them in the home. Staff spoken with said they feel well supported to carry out their role. Mandatory training and staff reviews have been somewhat achieved, the new Responsible Individual (RI) and managers are conducting a review to ensure all mandatory training and supervision are in place as required by the legislation.

The home is clean and has dedicated house-keeping staff. The home's décor presents as tired in some areas, the new provider has identified this and has plans in hand to maintain and refresh the home. Storage is an issue in some areas, this has also been identified and is being considered. Overall, the RI and staff are looking forward to the challenge of setting up the service anew and have innovative plans in hand.

Well-being

People have a voice regarding their care. We saw from people's personal plans that their wishes and preferences are documented and inform their care. People spoken with said they are happy with the care they receive in the home. A person told us in Welsh that staff are very kind to them, "*Mae staff yn ffeind iawn hefo fi yma.*" Another person said they had a choice when to get up and go to bed and what they wanted to do with their day. People have meal choices and can access snacks and drinks as they need them.

People's health is monitored, and health care professional referrals are made for people as needed and in a timely way. The regional manager told us the home is well supported by local GP's and people have frequent reviews. Training is provided for staff if people have specialist care needs to ensure they are skilfully cared for. Instructions from GP's and health professionals are documented in personal plans to provide instruction for staff.

People are supported to be as active as they are able. We saw there is an activities board in the home's reception with a calendar of events on offer for people. People can personalise their rooms with their personal possessions and hobby materials to help them feel at home. People are enabled to remain in contact with family and friends who can visit them in the home.

People are protected from abuse and neglect. Care staff receive training in safeguarding. Staff told us they know the procedure to follow should they be worried about a person's care and well-being. The service reports any incidents to Care Inspectorate Wales (CIW) and local authorities as appropriate.

People live in suitable accommodation. Health and safety assessments are in place and up to date. The service has Covid-19 policies and procedures in place to keep people as safe as possible.

Care and Support

People get the right care at the right time. People are assessed prior to moving into the home to ensure the service can meet their needs. Suitable assessments are in place regarding people's care needs, these are mostly updated in a timely way and as needed. Personal plans are informed by people's individual needs and preferences. Some notes are on paper and others on computer which is a little confusing. The regional manager told us they are in the process of converting all documents on to the computer which will make updates easier for staff. This will also improve the audit trail regarding people's care on a shift-by-shift basis. We were told this will also enable a better level of detail in care notes. Medicine management is compliant to legislation. The provider is to consider providing a dedicated medicines room in the home for all supplies for ease of storage and administration. People can access their medications and new prescriptions in a timely way. The regional manager states the local GP's and pharmacy are supportive of the home.

Infection control is good in the home. We saw staff wearing Personal Protective Equipment (PPE) correctly and hand sanitising gel is readily available. We saw PPE stocks are plentiful in the home. Staff told us they have received training in wearing PPE and Covid-19 procedures. Visitors to the home are asked for their Covid-19 test results and temperatures are checked. There is a good procedure for separating clean and dirty laundry and returning laundered items to the correct person. People are assisted with their hygiene according to their personal preferences. People can access equipment to aid with their care and moving and handling needs. Equipment is mostly serviced and maintained. People are referred for advice from health care professionals such as physiotherapists and Occupational Therapists as required.

Environment

The home has health and safety procedures and assessments in place to ensure people's safety. Utilities, such as water temperatures and safety of electrical equipment are frequently checked. Fire safety checks are conducted weekly. Fire training is organised for staff at the end of the summer. We noted the windows on the first floor had their restrictors removed and windows were opened wide, this is a health and safety risk. The regional manager addressed this immediately and told staff the restrictors must remain in place. We shall test their adherence to this in the next inspection. The electricity certificate and home's liability insurance are within date.

The service has dedicated house keepers to clean the home. The home décor presents as tired in areas, the provider has identified this, and plans are in hand to refresh and maintain the home. Storage is at a premium; this too has been identified and solutions sought.

Leadership and Management

The home has sufficient governance in place to ensure the smooth running of the service. The provider, manager and certain staff members are new to the home and are settling into the service. The Statement of Purpose has been recently updated and explains to people using the service what they can expect of the home. The RI has visited the home and is easily contactable.

People are cared for by staff who have undergone appropriate employment checks. We saw from staff files that staff recruitment and employment procedures are robust. The home has faced challenges during the pandemic in keeping sufficient staff numbers on-duty. New staff have been and are continued to be recruited to ensure adequate staff numbers for safe care. New staff have an in-house induction to familiarise themselves with people's needs, the layout of the home and policies and procedures. Staff spoken with told us they felt well supported and that managers are approachable. Staff training and supervision which support and enable staff in their role, are under review of the new management to ensure it is fit for purpose and compliant to legislation. Where agency staff are used, they are block booked for shifts to ensure continuity of care.

The provider has not declared any financial difficulties to CIW.

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 |

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 |
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Date Published 08/09/2022