



Inspection Report on

Fieldbay Ty Newydd Ltd

**Fieldbay Ty Newydd Ltd
Crown Road
Maesteg
CF34 0LN**

Date Inspection Completed

08/05/2024

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About Fieldbay Ty Newydd Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Fieldbay Ty Newydd Ltd
Registered places	16
Language of the service	English
Previous Care Inspectorate Wales inspection	8.11.2022
Does this service promote Welsh language and culture?	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

The committed staff team want to make a positive difference to people's lives: nurses and care workers demonstrate a thorough knowledge of the people they support. Electronic personal plans and risk assessments contain detailed and relevant information and are regularly reviewed. The service receives support from a number of external professionals and referrals are made in a timely manner. Staff provide a range of meaningful activities and people's dietary requirements are understood. Nurses and care workers provide care and support in a dignified, respectful manner and there are adequate numbers of staff to ensure people receive care and support when they need it. There is a strong sense of teamwork amongst staff, who are led by a pro-active, well-respected management team. Policies and procedures are regularly reviewed and aligned with current statutory guidance. The environment, its facilities and equipment are well maintained and standards of cleanliness and hygiene within the home are very good. The Responsible Individual (RI) has oversight of the service and quality assurance monitoring takes place regularly.

Well-being

People are treated with dignity and respect and have control over their day-to-day choices. We saw care staff talk with people in a warm and friendly way and were unhurried in their interactions and supporting them with tasks. People could choose to use the communal lounge, spend time in their own bedrooms, or access the outside space. There is a good choice of nutritious food available and kitchen staff have access to individual dietary information. A relative told us: "*The buffets are pretty spectacular*". Visitors are made welcome and gave us positive feedback about their experiences of the home.

Overall, people living at Ty Newydd are safe and protected from abuse. Nurses and care workers have access to policies and procedures that underpin safeguarding practice and are aware of how to report concerns. Those we spoke with all confirmed they would report any poor practice seen. The recruitment process is robust, ensuring staff are suitable for their role. A rolling programme of training and development is provided so care workers possess the skills and knowledge to deliver quality care. Medication is stored and administered safely as prescribed. Governance arrangements give the management oversight of incidents, accidents and safeguarding matters. One person told us: "*I feel safe with the staff*".

People have choice and control as far as practically possible. People or their advocates are involved in care planning and the review process. Their personal preferences are detailed in personal plans of care. Care staff encourage people to be as independent as possible and support them to develop skills to further their independence. People have their own personal routines and engage in activities of their choice within the service and the community. People have their own bedrooms which offer space and privacy. The RI engages with people when visiting the service and seeks their views as part of quality assurance processes.

People live in suitable accommodation, which supports and encourages their well-being. Rooms contain personalised items of choice. The home is clean and tidy throughout and is adapted to people's needs. The environment is safe, free from hazards and well maintained. Safety checks are completed when required and there is a fire risk assessment in place. Alarm testing and fire drills take place regularly and people have personal emergency evacuation plans in place.

Care and Support

People benefit from a good standard of care and support. A person-centred approach to care planning ensures people are central to the care and support they receive. The service uses an electronic system and personal plans are developed in partnership with the person or their representative. They highlight people's outcomes and provide care workers with clear instructions regarding care delivery. Robust risk assessments and management plans identify people's vulnerabilities and give care workers guidance on interventions that will keep people safe. A care manager told us they have no concerns: "*The care provided is high quality, especially with a challenging individual and circumstances*".

There are safe systems in place for the management of medication to maintain people's health. Medication charts show people receive their medication as prescribed. PRN (as required) medication records show their reason for use and any outcomes. We found medication is safely stored in keypad locked medication rooms. The completion of daily room temperature checks ensures medication remains effective. The overall management of medication is supported by regular staff training, a range of policies, and regular auditing tools.

People have things to look forward to. The service understands the importance of regular contact with family members and supports this through visits, regular telephone contact or flexible access to the service. Adequate staffing levels ensure people have the opportunity to participate in regular activities either individually or within a group. Personal plans outline people's preferred activities and daily notes we viewed show people access these preferences on a regular basis. Staff tell us activities are arranged flexibly and take into account people's health and emotional wellbeing. A relative told us "*X seems to be quite busy*" and "*there is lots going on*".

People experience warmth and kindness. We saw care staff treat people as individuals. They are very attentive and respond to people's different needs with appropriate levels of prompting and support. People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. People living in the home told us: "*Staff are very nice*", "*They are like family*" and "*It's brilliant here*". We saw positive interactions and care staff supporting people in a dignified manner during the inspection.

Environment

The service is set over two floors and can accommodate up to 16 people. People's rooms are decorated to their preference, furnished appropriately and contain items that are important to them. Bedrooms benefit from ensuite bathroom facilities. Communal areas within the home are clean and comfortable. There is a well-kept garden area where people can sit. It also includes the activities cabin, smoking shelter and brightly painted mural fences. There is a new sensory room, and two quiet lounges people can use. The Food Standards Agency has awarded the kitchen a score of 5, this suggests very good standards of hygiene. One person said: *"The food is nice, she's an excellent cook"* and a relative said: *"It's absolutely fine"*. Staff show positive infection control practices and have PPE (personal protective equipment) available to them when needed.

The environment is safe and secure. The service has effective systems in place to prevent unauthorised access. The service carries out routine testing and all serviceable equipment is checked to ensure its safety. A maintenance person has been appointed to undertake regular building maintenance and checks. All substances hazardous to health (COSHH) are stored correctly. Effective daily cleaning schedules are in place as all parts of the home are clean, tidy and well organised. We saw the laundry facilities, which are suitable to meet the needs of people living in the home. Fire safety measures and drills are completed routinely and everyone living at the service has an emergency evacuation plan in the event this is needed.

Leadership and Management

People are supported by a committed nursing and care team who are recruited safely and trained to undertake their roles. The human resources (HR) department confirm that the staff recruitment process meets all regulatory requirements. Care workers receive an induction in line with Social Care Wales's requirements. Staff receive training relevant to their roles and this includes infection control and safeguarding training. We saw that there are robust company policies and procedures for staff to follow. We looked at a selection of policies: complaints, infection control, medication and safeguarding and found them to be up to date. Nurse pins are valid which evidences their suitability for practice, verified on the Nursing and Midwifery Councils website. Care workers are registered with Social Care Wales and all staff have a valid disclosure and barring service check (DBS). Nurses and care staff we spoke to confirm the management team are always accessible and provide a good level of support. We were told: "*I really enjoy it here*", "*I'm proud to be here*" and "*I love my job*".

We note there have been no complaints since the last inspection. The manager appropriately notifies relevant regulatory bodies and statutory agencies, when there are concerns and significant events, which might affect the well-being of individual's receiving care. We found the communication is effective, open and transparent.

Staff anticipate and respect the need for confidentiality. Care records are safely stored electronically. Employee personnel records are kept centrally by the HR department. Deprivation of Liberty Safeguards (DoLS) records were easily referenced electronically. In addition, people were safe from unauthorised visitors entering the building. Visitors have to ring the bell to access the building. All visitors have to complete the visitor's book when entering and leaving. People's privacy and personal information is well protected.

People can be confident the service provider and management of the home monitor the quality of the service they receive. The service is provided in line with the objectives of the Statement of Purpose, which is regularly reviewed. We found people and families give positive feedback about the care provided. The RI visits the home regularly and meets with residents and staff. We viewed the latest quality monitoring report, which evidenced people's feedback and recommendations for improvements in the home. We looked at documentation that confirmed the RI conducts quarterly visits to the home to complete quality assurance monitoring.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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