



Inspection Report on

Fairways Newydd Nursing and Dementia Care Centre

**Llanfairpwll
Anglesey
LL61 5YR**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date of Publication

Monday, 8 October 2018

Welsh Government © Crown copyright 2018.

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.

Description of the service

Fairways Newydd is a purpose built care home in Anglesey which benefits from views of the Snowdonia mountain range. It is close to the Britannia Bridge and has easy access to local transport links and amenities.

Fairways Newydd Ltd is registered with Care Inspectorate Wales (CIW), to provide personal and nursing care for a maximum of 76 people. This can include a maximum of 36 people aged 18 years of age and over who are in receipt of nursing care, and a maximum of 40 people aged 18 years and above in receipt of nursing care due to Dementia/ Mental Health care needs. There were 64 people in residence on the day of inspection.

The service has a responsible individual working on their behalf. The home has a manager who is working towards their level five qualifications in order to register with Social Care Wales (SCW).

Summary of our findings

1. Overall assessment

Fairways Newydd has been extensively renovated by the new providers with a view, in particular, to being dementia friendly. The service has recruited new staff members and is imbedding some good practices and procedures in daily roles for the benefit of the people cared for.

2. Improvements

A positive recruitment drive has provided people with a cohesive staff team who are able to give stability and a sense of belonging. The improved environment and facilities have created an uplifting environment for people. Dedicated medication rooms in each “household” of the home have enabled good medication practices.

3. Requirements and recommendations

The care home is meeting legal requirements. Section five of this report sets out our recommendations to improve the service. These include:

- Drug fridge temperatures to be monitored consistently.
- Opening dates to be placed on creams and emollients.
- Competency testing (practice checks) for night staff.
- Supervision of nursing staff to be conducted regularly, consider a well-being element in the session.

1. Well-being

Summary

We found that people are treated with dignity and respect. People are assisted to be as active as they are able to be. People have sufficient diet and nutrition. The quality of the food offered is under review, the providers are considering changes to overall catering management to ensure that standards are consistently good.

Our findings

People are treated with dignity and respect. We observed that interactions between staff and people were very warm, friendly and respectful. A person's relative told us, "*Staff are very good and there's good communication with families from the service.*" They showed us a letter from service providers telling families of changes to the management structure of the home. We saw that lunch time was relaxed and unhurried; people were helped to eat if they required it, and people's relatives were welcomed at meal times and were able to assist their relative if they wanted. We heard staff conversing with people in Welsh and English in a supportive, friendly way. People told us that they could maintain their dignity in the home and were given daily choices on how to spend their day. People have warm, appropriate relationships and a sense of belonging in the home.

People are offered a variety of activities. The home has a dedicated activities person; they told us of a sensory course they had developed for staff in order that they may experience life from the perspective of people living in the home who had hearing, sight and mobility issues. There was an activities room available with plenty of craft and activity supplies. Some of the people had been restoring old furniture and were taking them to auction to raise funds for more craft supplies. The activities person showed us their computerised records, we saw that a wide range of activities were offered to people and that one to one activities were offered to people who were unable to leave their rooms, for example reading, painting, drawing, a record was kept of what people's individual interests were. We saw posters in each house-hold (as they are known in the home), advertising the weekly events/ activities offered. We were told that both English and Welsh entertainers visited the home to cater for people's first language choices. A weekly gardening club had been organised and people's families were also able to join in. A sensory room was available for people to relax and snooze in, it had ambient music and sensory lighting and perfumed oils to aid people to relax. People have opportunity to be as active as they are able to be.

People have sufficient nutrition and hydration. We saw that a four weekly rotational menu was available for people; we visited the kitchen and saw that meals were freshly made in-house. Special diets were catered for; the cooks knew who required supplements and particular foods and textures. A person's family member told us, "*She's looked after well, nice meals and plenty of snacks.*" Two people living in the home told us that the food was "*good*". We saw from the responsible individual's quality of care reports that some mixed responses had been received from people's families regarding the food. The manager told us that a review of the over-all management of catering services was underway and that consistent quality control of food was being addressed. We found that people's nutrition and hydration levels were well monitored by staff, we saw that staff noted people's intake throughout the day on the computerised care system. People told us that they had daily

choices regarding meals and that they were given an alternative if they did not like the meals offered. People are supported to maintain good hydration and nutrition levels to ensure their health.

2. Care and Support

Summary

People have the right care at the right time. Care records reflect the care required and given and is person centred. Medication systems are audited and are of a good standard.

Our findings

People receive timely care to meet their needs. We saw from the care files that nationally recognised tools were used to assess people's risk of falls, pressure sores, nutrition, weight, mouth care and moving and handling needs these were reviewed and updated monthly or as people's health needs required it. We saw that the doctor was called when people were unwell or in need of assessment. We saw that a doctor was visiting a person on the day of inspection, they told us (in Welsh), "*Mae'n iawn yma, pobl i weld yn hapus, lot o waith di cael ei wneud ar y cartref. (It's fine here, people seem happy, a lot of work has been done on the environment of the home).*" We saw that visits from professionals were carefully documented in people's care records and instructions passed on between staff. We saw that people's health and safety was protected as far as possible, people had risk assessments in place and safe moving and handling assessments and instructions. We noted that the falls rate was low, people were assessed as to their falls risk and people's beds could be lowered to the ground to minimise injury should people fall. We saw that the dietician and speech and language therapist was called in a timely fashion where people were losing weight or had swallowing difficulties. We saw that documentation was detailed for people with wounds and that progress and healing was easy to follow. People with capacity issues had access to advocacy systems and people who were not free to leave the home unaccompanied, for their own safety, were assessed and referrals made to the Deprivation of Liberty (DoLS) panel. Care plans were detailed and person centred, describing people's daily routines and how they liked things done. A person living in the home told us, "*I'm happy here; I get to keep my independence but don't have to worry about day to day things getting done.*" Health monitoring is good and people receive person centred care which respects their individuality.

Medication systems are fit for purpose. We saw the Medication Administration Records (MAR) where compliant to regulations and there were no gaps in nurses' signatures to demonstrate medications had been given as prescribed. Where people were unable to tolerate medication, a code equating to a reason for non-administration was given. The home had medication audits completed to ensure good and consistent practice. We tested random pages of the controlled drugs book and saw that the counts were correct and checked by two nurses. Each corridor, known as "households" had their own lockable medications trolley and locked store room which nurses told us was an improvement as medicines could be accessed quickly as people required them. We saw that there were some gaps in the medication fridge temperature tests which are completed in order to ensure that the fridge was at optimal temperature to store medication safely. The manager assured us that this would be addressed. People's prescribed creams and ointments had their names on them, we suggested that they also had opening dates to ensure they were used within the recommended expiry, the manager said that this would be done. The manager told us that doctors and specialist nurses were proactive in assessing people's medications and that the local chemist supplied prescriptions in a timely manner. People

receive their medications as prescribed and as required.

3. Environment

Summary

The environment is fit for purpose, has seen many renovations, and is particularly dementia friendly.

Our findings

The environment has been extensively renovated. People, families and staff were complimentary about the new surroundings and felt it was uplifting and appropriate. We saw that there were more individual lounges rather than the one large lounge available previously for those receiving general care, which provided people with privacy and choice of where to sit. There were birds in cages and ambient music playing to encourage relaxation. We saw that people's rooms were compliant to regulations and were airy and light, people were able to personalise rooms with their possessions. A new lift had been installed for easy access to the ground floor. Outside spaces were accessible for people to sit out in good weather and attend such events as BBQ's. We saw that the laundry was tidy and compliant to regulations, with a good system in place to ensure people had their own clothes returned to them. The kitchen was clean and well organised and had a hygiene rating of 4 which equates to "good". We saw that alarms were regularly tested and that fire and maintenance checks were up to date. The entrance to the home was being renovated during the inspection visit to provide an improved reception area. Dementia care households were colourful and had pictures, memorabilia, and craft work in them to stimulate people's memory. People had personalised coloured doors to their rooms and personal artefacts to remind them of life events. People benefit from an environment which is modern, fresh, and uplifting.

4. Leadership and Management

Summary

This new service is developing a staff team which work together for the benefit of people living in the home. There is evidence of audit and quality testing of the service to ensure good standards. Staff feel well trained and supported.

Our findings

Staff are well led and supported. Staff told us, *"Its fine here, I'm happy with the changes. We get regular e-learning and training. Management are supportive and the staff team are nice,"* and, *"We are able to give good care here, we get supervision and training and managers are approachable."* Another member of staff said, *"Good place to work, staff and managers are nice."* We saw from the training records that staff received mandatory training and training on topics such as dementia care which supported good daily practice. Care assistant workers received regular supervision, nurse supervision had fallen a little behind, and the manager was new to post and stated that they were working towards addressing this. We saw minutes of staff meetings demonstrating that managers updated staff as regards any changes and requirements. We noted that managers had good over-sight of daily care; we suggested that an audit of night practice would also be good practice to ensure consistency of care from day to night and to ensure that night staff also received support. People benefit from a staff team who are supported to have good practice.

Recruitment practices are compliant to regulations. Staff files contained relevant information as per the regulation schedules and staff safety checks were completed to ensure that staff were appropriate to be working with vulnerable adults. Two family members told us that although they were happy with the care, the lounges seemed to lack staff at certain times of the day. The manager told us that staffing levels were consistent, staff members had to do their rounds to assist people who were in their rooms at certain times in the day but people in the lounges had call bells to alert staff to their needs in the general nursing lounges, more staff were available in in the dementia care lounges. The manager said that the home had a full complement of nursing staff but they were still recruiting some care workers. Recruitment and retention practices are good in the home.

The service is tested as to its' quality. We saw that the responsible individual was up to date with quality testing. Quarterly reports were available showing that people living in the home, families, and staff were asked for their opinions about the service. People's comments were noted and responses made as to how things were to be addressed. The environment was also monitored and an update of changes made. People are enabled to influence their care and environment.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None- this was a post registration inspection.

5.2 Recommendations for improvement

We recommend the following to encourage good outcomes for people living in the home:

- Drug fridge temperatures to be monitored consistently, to ensure the fridge is at optimal temperatures for safe medication storage.
- Opening dates to be placed on creams and emollients to ensure that they are within date.
- Competency testing (practice checks) for night staff to demonstrate clinical over-sight of the consistent standard of care on both day and night shifts (as day shifts have more frequent managerial/leadership presence).
- Supervision of nursing staff to be conducted regularly to provide support and ensure good practice, consider a well-being element in the session.

6. How we undertook this inspection

This was a full, unannounced, post registration inspection for the service. We inspected the home on the 30 July 2018 between the hours of 11:40am and 17:40pm.

The following methods were used:

- We spoke with the manager; visiting doctor; hairdresser; three members of staff, two relatives and two people living in the home.
- We used the Short Observational Framework for Inspection (SOFI 2). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- We looked at a wide range of records and focused on five care files; staff training and supervision records, three staff files; supervision documents; fire and maintenance book, statement of purpose; health and safety monitoring; two months of staff rotas (as worked) for day and night duties; audits and the responsible individual's quality of service reports.
- We toured the premises and facilities including a selection of people's rooms.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Fairways Newydd Ltd
Registered Manager(s)	
Registered maximum number of places	76
Date of previous Care Inspectorate Wales inspection	Post-registration inspection.
Dates of this Inspection visit(s)	30 July 2018.
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	Yes.
Additional Information:	