



Inspection Report on

Fairview house and White Cottage

**Tonypandy
CF40 2UF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

26 November 2021

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About Fairview house and White Cottage

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	19/06/2019
Does this service provide the Welsh Language active offer?	The service is working towards a Welsh Active Offer.

Summary

People receive encouragement to lead active lives and make daily choices. Up to date plans identify people's personal outcomes. The management of medication is effective and health needs are addressed in a timely manner. The service maintains positive lines of communication with professionals, people and relatives. Staff treat people with dignity and kindness and relatives feel assured care provided is of a good standard.

People benefit from receiving consistent support from a knowledgeable and experienced care team. Care workers feel well supported by their manager and receive regular supervision. The environment is clean and comfortable with hazards managed effectively. Policies are detailed and up to date and there are good systems in place to monitor the quality of care provided. Staff recruitment supports safe practice and staff have access to core and specialist training to ensure they are sufficiently skilled to undertake their role.

Well-being

People have a voice and contribute to decisions made around their day-to-day lives. Resident meetings and reviews of personal plans provide opportunities for people to express their views and opinions. People receive support to maintain contact with relatives and key individuals as often as they would like. Care workers ensure people occupy their day by participating in a range of activities they enjoy. Language needs are considered and the home is working towards a Welsh active offer. The Responsible Individual (RI) visits the home routinely to gather feedback and ensure the care provided supports people's wellbeing.

The service supports people's physical and emotional wellbeing. Personal plans contain information on current care needs, future goals and aspirations. Reviews consider changes in care needs and the extent to which people have been able to achieve individual goals. Timely referrals to healthcare professionals and good medication management support people to remain as healthy as they can be. Daily routines place a focus on healthy lifestyles and diets. Any behaviours that may challenge are understood and managed in a least restrictive way.

Measures are in place to protect people from harm and abuse. Up to date policies support the service to maintain good practice. Recruitment checks ensure staff working at the service are suitably skilled and of good character. All staff are aware of their responsibilities regarding safeguarding concerns. Risk assessments ensure that any care provided or activities undertaken are as safe as they can be. The service promptly notifies relevant bodies of incidents or concerns. Care workers have a good supply of personal protective equipment (PPE) and COVID testing kits, care workers report feeling confident in using these tools.

The physical environment supports people's well-being. Secure access to the property ensures only authorised individuals enter the building. The environment is well decorated, homely and maintained to a good standard. Communal and private areas are clean and free from clutter. People can spend their day in communal areas, in their own rooms or in their personal sitting rooms, as they prefer. The service undertakes appropriate security checks and fire safety measures to make sure people remain as safe as possible.

Personal plans give a real sense of the person and reflect individual needs. The development of personal plans includes input from people and/or their representatives. Files hold current and relevant information. Staff sign to evidence they have read updated plans and are familiar with individual needs. The service recognises the importance of maximising people's strengths and achieving positive outcomes. Specialist health and social care professionals help develop plans and contribute to the reviewing of care. Any identified hazards have plans in place to minimise risks to self or others. People attend routine health appointments and the service addresses any health changes in a timely manner. Plans detail cultural and religious needs, including information on how to observe religious calendars and any change in dietary needs during this time. People have access to interpreters to aid communication and understanding. Communication plans ensure care workers know how to greet people in their preferred language, which helps them to support positive interactions.

People benefit from a good standard of care. Low staff turnover means care workers are familiar with people's needs and understand their likes and dislikes. An ongoing programme of daily activities enable people to do things they enjoy. On the day of inspection, we saw one person supported to collect their daily newspaper, which was important to ensure they had a positive start to their day. We saw plans in place to enable people to attend community sessions and engage in a number of activities. Relatives told us the care provided was "*second to none*", care workers were "*friendly*" and "*like family*" and the manager was "*excellent*". During the inspection care workers responded to people in a timely fashion and we saw a number of genuine and friendly interactions.

We found systems in place for assisting people with their medication. We viewed a sample of medication administration records (MAR's) and found these to be completed appropriately. Secure arrangements are in place for medication storage. The service holds correct authorisations for those people who lack understanding around their medication needs. Strategies and risk assessments in place mean care workers only consider PRN (as required) medication after all other options have been explored. Staff competency checks and medication audits ensure people receive the correct medication and practice remains safe.

Environment

People benefit from a clean and well-maintained home environment. The furnishings and decor within the home are in good condition and rooms feel welcoming and pleasant. Since the last inspection, furnishings have been replaced and paintwork freshened. Garden landscaping is ongoing with new walls and steps at the front of the property. This will provide a pathway to the new wooden sensory garden building purchased by the service. Bedrooms and communal areas are suited to people's needs, which allows them to move around safely. Daily cleaning schedules are in place and named staff are aware of their responsibilities to maintain specific checks. We found good infection control measures and observed PPE used appropriately.

The home environment is safe and secure and confidential information is stored appropriately. People are safe from unauthorised visitors entering the building and ongoing testing reduces the risks of COVID transmission. Gas and electricity safety testing is up to date and all equipment is serviced. People have personal emergency evacuation plans in the event of the need to evacuate. Fire drills are undertaken routinely and staff ensure they lock away cleaning substances hazardous to health. Records are stored securely within the home and are only available to authorised care workers.

Leadership and Management

Governance and quality monitoring arrangements are effective. The service has a range of policies and procedures, which are fit for purpose and care workers we spoke with, have a good working understanding of these. The statement of purpose and service user guide are up to date, reflect the service provided and are available in Welsh. The RI completes three monthly visits and six monthly quality of care reviews to ensure people receive good quality care. Audits undertaken evidence monitoring is ongoing and timely action is taken to address any practice issues. The service notifies the relevant professionals of incidents and significant events.

The recruitment of staff is effective and care workers receive support to maintain their professional practice and knowledge. Recruitment files are in good order and contain the necessary information. The training matrix confirms the service offers frequent training opportunities and staff remain up to date with all training requirements. The service offers Welsh language training and there are some Welsh speakers within the organisation. Staff we spoke with told us they had the right skills and knowledge to assist people.

Care workers feel supported and receive regular supervision. We saw evidence of regular team meetings and supervision to support professional development and discuss any changes to the service. On the day of inspection, staff morale appeared positive and staff worked well together as a team. This was confirmed in the feedback we received from staff and from supervision minutes. From viewing a selection of staffing rotas and feedback provided, we can be confident sufficient staffing levels are in place. The service does not use agency workers to cover shortfalls, which ensures people receive support from a consistent and knowledgeable team of staff. Care workers told us they enjoyed their work; they have clear roles and responsibilities and understand what is expected of them.

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	N/A

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