



Inspection Report on

Fairways Nursing Home

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

Date Inspection Completed

4 May 2023

04/05/2023

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About Fairways Nursing Home

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	11 July 2022
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

This is a focused inspection looking at well being elements for people living in the home.

Fairways is a service caring for adults with nursing needs. People spoken with told us they are happy in the home and feel they are well cared for by kind, responsive staff. We saw people have person centred personal plans on a computerised system which are regularly reviewed and updated. People told us they have choices regarding hygiene requirements, meals and how to spend their day. Menus offered are varied and enable people to have choices, people needing special diets are catered for. There is open visiting in the home and people can stay in touch with family and friends.

The environment is clean and tidy. Some redecoration is required throughout the home, this has been identified by the manager and Responsible Individual (RI). A maintenance and redecoration process are underway in the home. Storage is an issue in some areas, the RI and provider are currently considering solutions to this. People can personalise their rooms, bedding and linens were plentiful and clean on the day of inspection. This was a focused inspection, and we did not consider the environment in detail.

Staff spoken with told us they are happy working in the home, and they feel well supported by management. We saw where staff are absent, the manager is proactive in ensuring adequate cover is available on work shifts to ensure people's safe care. Staff told us they have regular supervision. We saw from the training records that training is over-due for many subjects. The manager showed us evidence of in-house training booked and said time was to be organised for staff to complete on-line training also. Whilst we saw no immediate impact, the RI is to take action to ensure staff have appropriate training in a timely manner.

Well-being

People spoken with said they are happy living in the home and feel staff are kind. We saw people sitting out, enjoying watching TV or reading in their rooms. We saw a birthday celebration for a person in one lounge. We saw bunting and flags decorating the home for the King's Coronation and saw a poster for a party in the home. People told us they were looking forward to this. We saw the activity calendar for the month demonstrating people are offered varied activities. People's personal plans reflected that people could have choice in their daily lives, regarding baths/ showers, meals, and activities. Menus offered demonstrated people can choose between meal options and special diets are catered for. There is open visiting in the home, people confirmed this and said they were able to stay in touch with family and friends.

People's rooms are tidy, beds are made, and linens are clean. People receive help to eat their meals and told us they have access to drinks as they want them. Some walls and woodwork need attention, this has been identified by the RI and is to be addressed. People can personalise their room with things of importance to them, we saw people have hobby materials, books, and TV. We saw people with complex needs are checked and assisted according to their plan of care.

Staff have regular supervision to support them in their role. Staff told us they were aware of the local safeguarding process for safeguarding vulnerable people. We saw core training was out of date for many staff members. The RI has identified this and assures us it will be addressed. Whilst this does not have an immediate impact, we expect the RI to take action to improve the issue.

We observed the home has almost full occupancy, the manager told us they care for several people with complex needs who need the help of two or more staff at a time. We saw staff are busy, but care is given at a steady pace. People's call bells are answered in a timely manner. People spoken with said they are happy with the care they receive. We saw people are appropriately dressed, and they told us they have options regarding their hygiene needs. A person told us, "*If I want a bath, I have one.*" We saw a shower record and frequency record for changing bedding linen reflecting people's needs and how they are met. People's personal plans are centred around their personal needs, we saw they are updated as required and as people's condition changes.

People's personal plans are now on a computerised system. This enables staff to keep records up to date and gives the manager over-sight of the care given. The system records each time people receive attention and what care is given, and if drinks and food are consumed, and in what quantity. The system alerts the manager, or person in charge of the shift, if care has not been given within the prescribed time frame for the person's care and wellbeing so this can be addressed.

The service notifies Care Inspectorate Wales (CIW), of any events affecting the smooth running of the service. They work with the Health Board and Local Health Board to safeguard vulnerable people. We saw evidence of appropriate reporting to the Safeguarding Team to ensure people's safety and well-being. Staff told us they were aware of the local safeguarding process and knew who to contact should they have concerns about any people living in the home.

We saw that a new medications room has been built. The manager said this has improved medication storage and administration practices. We saw medications are stored and administered in a safe way. The manager and RI said there are sometimes delays in obtaining medications (no more than a few hours), this is due to communication systems between the Doctor's surgery and chemist. The RI assured us that talks are to be held with both parties, and that an improved system is being considered.

Environment

This was a focused inspection, and, on this occasion, we did not consider the environment in detail. The environment will be considered in full at the next inspection.

We saw people can personalise their rooms with things that matter to them. The rooms viewed were clean and tidy, bedding is clean and clean linens are in good supply. Where we noted equipment is in need of replacing, the manager showed evidence these have been ordered. The manager said there is a budget for replacing linens and equipment as required. People spoken with said they are happy with their rooms. We noted some paintwork to walls and woodwork throughout the home need attention. The RI told us of their ongoing maintenance plan. We saw in the RI visit reports that the RI actively walks around the home on a frequent basis and notes areas within the environment which need to be addressed. We noted storage difficulties in certain areas of the home, the RI stated space is at a premium at times, and they are considering solutions to this. The garden is well maintained and there are areas for people to sit should they wish to.

Leadership and Management

The service has a robust managerial structure to keep the home running smoothly. The RI is compliant to the regulations as regards visiting the home and measuring the quality of the service given to people.

The staff records viewed demonstrate good recruitment and employment practices. Appropriate checks are in place to ensure staff are appropriate to work with vulnerable adults. Records demonstrate that staff have regular supervision sessions to give them support in their daily role and to encourage best practice. Staff have annual appraisals to assess performance and provide them with support.

Staff told us they are happy in their work and feel supported by management. We saw the numbers of staff on day shifts have been increased to ensure people have safe care. We viewed work rotas, and saw where staff are absent, the manager ensures there is sufficient cover on shifts to support people's care needs.

Staff told us they felt training was generally sufficient in the service to inform them in their role. The manager showed evidence of in-house training booked for the next months in the home and said staff can access training on-line also. However, we saw from the training matrix that training is out of date for many staff members regarding several subjects including mandatory subjects. We saw from the RI quality report that this was true from the previous year also. Whilst there is no immediate impact on the service, we expect the provider to take action to address this issue.

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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36	The provider has not ensured there is timely core training to inform staff in their work.	New
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