

Inspection Report on

Ridgeway Care Centre

Ridgeway Nursing Home Llawhaden Narberth SA67 8DG

Date Inspection Completed 5 January 2022

05/01/2022



About Ridgeway Care Centre

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Mufulira Ltd
Registered places	47
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

This was a focused inspection.

People are cared for by staff who know them well and who support them to make decisions. Family members and representatives are involved where appropriate. Staffing levels are determined by the home's occupancy and people's dependency levels. People's outcomes are met in a timely manner and resources are available as determined by individual's assessments and personal plans.

Choices are provided with daily activities including where people eat their meals or choose to spend time; that being the dining room, conservatory lounge; main lounge or in their bedrooms. Activities are provided in groups and for individuals. Ridgeway Care centre provides a relaxed, homely environment for people to spend time. Visiting is supported within the current COVID 19 guidance.

Staff told us they feel supported by the manager and deputy manager. At the time of the inspection an application is in progress for a proposed Responsible Individual (RI). Some staff told us they had not been paid on time last month and this was a concern to them. The provider told us this does not reflect on the financial viability of the home.

Well-being

The well-being of people living at Ridgeway Care Centre is promoted by the manager and staff team. Staff know people well. Positive interactions take place with staff showing respect and kindness. People are provided with choices with their daily activities, social activities and meals. The activity co-ordinator determines the daily activities by facilitating discussions to identify what activities people want. Visiting is facilitated depending on the latest COVID 19 guidance. Feedback received includes "Whenever we want to be with X we can"; "We have been totally involved with the choices made to help her" and "The fact that she has choices is brilliant".

People get the right care and support. Records reflect referrals are made to a variety of healthcare professionals such as Speech and Language therapist and district nurse. Care is provided in a timely way as detailed in people's personal plans. This includes continence care.

There are clear systems in place to safeguard people living at the home. Risks are identified as part of the initial assessment process and reviewed on a regular basis. Risk assessments are accessible to staff. Considering COVID 19 guidance, the manager, deputy manager and team at Ridgeway Care Centre enable people to socialise and spend time with each other and visitors. Staff told us "We protect our family".

Care workers and nurses wear personal protective equipment (PPE) when supporting people in the home. PPE is available for staff and visitors. Information is requested prior to visitors accessing the home and the required lateral flow device test is completed to ensure the latest COVID-19 guidance is adhered to.

Care and Support

As this was a focused inspection, we have not considered this theme in full.

Care is provided in a person centred way ensuring people's outcomes are met. Care documentation seen in people's rooms detailed pressure care, continence care and nutrition needs provided. People appeared comfortable and clean. People had personalised bedding and items within their room. Care files contain personal plans and risk assessments that are accurate and inform the care provided. Staff know the people they care for well. We were told "We give the best we can with the time we have," and "The standard of care is wonderful and staff show so much patience and warmth".

Activities are provided for people. The activity co-ordinator is on duty four days a week. Staff told us "The activities are stimulating for the residents" and the benefits are apparent. During the inspection, a quiz was held in the main lounge in the morning with chair exercises in the afternoon. People appeared to enjoy the activities. Visiting is facilitated in the conservatory or in people's bedrooms. The activity co-ordinator showed us Christmas decorations that people had made for the home. A diary recording is made of activities that take place.

The manager informed us staffing levels are generally good with the numbers of staff on duty determined by the dependency and number of residents. There are times when unplanned absences affect the staffing ratio but staff told us they pull together as a team. Recruitment is underway and recruitment is an ongoing challenge.

During the inspection, we noted a calm atmosphere in the home and whilst staff are busy needs are met in a timely way. Staff told us "They work hard and they give their all" and "we are here for them and not anybody else".

Environment

As this was a focused inspection, we have not considered this theme in full.

The home is warm, clutter free and homely. People are relaxed, comfortable, and able to access a variety of communal areas within the home. People's rooms are personalised, clean and tidy.

Improvements have been made to aspects of fire safety such as the replacing of interlinking fire doors and central fire panel with work completed on individual sensors. The front door needs to be wired into the fire alarm system and the manager told us this was awaiting an electrician.

We were told due to the age of the house there is an ongoing programme of refurbishment and repairs. This includes two bedroom windows that require costly repairs. These rooms are currently not in use for residents. The manager told us an annual plan is in progress and includes replenishing towels and bedding with a view to replacing curtains in the home. Areas of the home had been repainted and the conservatory area was clutter free and tidy to facilitate visiting and access to activity equipment for the home.

Personal protective equipment is available for staff and visitors and this is worn as required. Hand sanitiser is available at various points throughout the home. Stocks of continence aids are available within people's own rooms with a main storeroom. Stocks are checked several times a week.

Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

Staff told us they feel very supported by the manager and deputy manager. Feedback from staff included "The staff seem to be a happy team" and "It's safe to say I love working here". Sometimes staff absences have resulted in the manager and deputy manager covering nursing shifts and more so recently shifts in the kitchen in the absence of a cook. This has had some impact on managerial tasks but the manager and deputy manager told us things have improved and they are catching up with supervisions and annual appraisals. The manager and deputy manager told us the director and applying RI are available on the phone if required and the applying RI has been to visit the service for a day in November and again in December to provide support when there was a delay with staff salary payment.

The manager has not received individual supervision in the past six months. We expect the provider to take action to address this and we will follow up at the next inspection.

Some staff told us they had not been paid on time last month. We discussed finances and availability of resources with the manager. Recruitment is underway with three new starters planned for next week. The manager advised she requested additional money for food last month and the request was granted. Additional monies had also been made available for an upgrade to kitchen utensils. The cook confirmed the food budget is adequate and they are able to manage the menu and choice for the number of residents in the home. People spoke positively about the food choice and quality. One member of staff did say a choice of more than one vegetable was not always provided. This has been addressed in the past. We spoke to the director of the service who informed us that the delay in payment of wages is not a reflection of the financial viability of the service.

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
66	The provider has not arranged for individual supervision to be provided for the manager in the	New

	absence of a Responsible Individual.	
57	Fire risks have not been mitigated as identified within fire risk assessment.	Achieved

Date Published 18/02/2022