



Inspection Report on

Fairhaven Care Home Ltd

**Fairhaven Care Home
14-16
Ellesmere Road
Colwyn Bay
LL29 8RP**

Date Inspection Completed

08/12/2023

Welsh Government © Crown copyright 2023.

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.

About Fairhaven Care Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Fairhaven Care Home Ltd
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	30 July 2021
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy and are supported to live their lives as they choose. Their voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to the appropriate professionals to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to ensure people receive the care they need to remain as healthy as possible. People are well kempt and everyone we spoke with confirmed people can have baths or showers whenever they wished.

Care is delivered by an enthusiastic and familiar staff team, led by an effective senior manager. Care documentation accurately reflects that people are being cared for appropriately by care staff and in line with their personal plans.

The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm and clean. The Responsible Individual (RI) has oversight and visits the service regularly. There are clear systems in place to monitor the quality of care provided, and the RI's three-monthly report and the services six monthly reviews are being undertaken and detailed.

Well-being

People are supported with their physical and social wellbeing. People, relatives, and health care professionals we spoke with are complimentary of the care staff and management of the home. We observed care staff assisting people calmly with dignity and respect. Care records give care workers the instruction required to support people accurately and are reviewed appropriately. We spoke with professionals, relatives of people living at the service, and care staff and saw documentation which show referrals to relevant health care professionals are made in a timely way. We observed care workers have good knowledge of people's needs, refer to people in a positive way and it was clear they know the people they support well. We saw people being helped by care workers appropriately, not being hurried, in a kind and gentle manner.

People can exercise choice and control over their every-day lives. We observed people enjoying the company of others in various seating areas. We observed interactions with people by care staff to be considerate and respectful of people's wishes. There is a choice regarding meals, and we saw people having alternatives if they do not like what is on the menu. We observed and people told us they could get up and go to bed when they wished. The provider seeks the views of people living at Fairhaven and the staff team.

People are protected from potential harm, abuse, or neglect. Care staff records are checked robustly. Training records show care staff have undergone appropriate training. There is a robust set of management audits in place which ensure any risks are minimized.

The home is clean, warm, comfortable and bedrooms reflect individuality. We viewed documentation which showed maintenance work had been identified. It is clear the provider is investing in the home.

Care and Support

People can be confident staff have an up-to-date plan of how their care is provided. Personal plans are in place, reviewed regularly, and care workers told us documentation gives them enough instruction to undertake their role. This was confirmed by documents we viewed. People's personal plans and risk assessments give a detailed history of their medical conditions and reflect outcomes in professional and health care professionals' documentation found in people's records. We viewed staff handover documentation which was detailed. Care workers we spoke with confirm personal plans and risk assessments are an accurate reflection of the person they are supporting. We spoke with people and their relatives, all felt care staff support them in a timely way, discuss their or their relatives care with them and support the person in the way they wish. A relative told us *"The home contacts me if there are any issues, they keep me informed."* We spoke with health care professionals, who confirmed care staff follow instructions well, are receptive, and are aware of people's needs.

Care and support are provided in a way which protects and maintains the safety and well-being of individuals. We saw care workers supporting people appropriately, at the person's own pace and with dignity and respect. People we spoke with confirmed care staff are kind and gentle when supporting them. A relative told us *"My relative gets the care and support they need...staff are proactive in getting medical attention...staff are always checking my relative."* People are well kempt, and able to have a bath or shower whenever they wish. The cleanliness of people was confirmed by everyone, care staff, professionals, relatives, and people living at Fairhaven. People also told us they could have baths and showers whenever they wished. Someone living at Fairhaven said *"Staff treat people well and are kind and considerate. I get the support I need...I can get up and go to bed and have a bath or shower whenever I want."* We saw people's dietary requirements are clearly detailed in people's care documentation and this information is available for staff in the kitchen and reflects information held in professional documentation. We saw care staff monitor food and fluid intake and people's weight.

People can be confident they are provided with quality care and support they need, and the provider takes into consideration their personal wishes. We saw people were given preferences of what food they could have at mealtime through menus, and we saw people who, when they told staff they did not like the options, were given something different of their choosing. People we spoke with also confirmed this happened and the food was good. We observed mealtimes were a pleasant experience for people, with good positive interactions happening. We were able to smell the food throughout the home, which was appetising, and enabled people to orientate towards mealtimes. We saw people enjoying each other's company and spending time with care workers. We observed care staff interacting with people appropriately at their eye level and at the person's pace.

Environment

People live in an environment that is suitable to their needs. The home is warm and welcoming. Decoration in some communal areas looks a little “tired,” however both the manager and RI said that after the current extensive works to the home are finished this work will be undertaken. There is space for people to choose where they want to spend their time and during the inspection; we saw people sat in the different areas. We viewed a selection of bedrooms throughout the home and saw they are well decorated, warm, clean and people can personalise them if they so wish. People told us they are happy living at the home. We observed daily cleaning being undertaken by the domestic staff. Communal areas are hazard free. The home shows evidence of recent, substantial, and ongoing investment by the owners. We saw some bathrooms had been re-tiled and new bathroom furniture had been installed. A new lift has just recently been installed and a new washer and drier have been purchased for the laundry. Works to the roof are extensive and ongoing. We were advised that new flooring was to be purchased for the dining room. Fairhaven has a pleasant conservatory which people can enjoy, and we were shown evidence of people enjoying the outside area when the weather was better.

People can be confident they live in a safe environment. The main entrance is secure, and our identification was checked before we were permitted entry. People’s care documentation is kept electronically, and this is password protected. All the relevant equipment checks are being undertaken throughout the home.

Leadership and Management

Care staff are employed in appropriate numbers to enable people to achieve their personal outcomes. Care staff said there are enough staff on duty and people are not left for lengthy periods of time, which was also confirmed by people we spoke with. We viewed paperwork which shows staffing levels are in line with the providers statement of purpose and what is expected by the managers.

The provider ensures care staff receive supervision in the time frames stipulated in the regulations. We also spoke with care workers who told us they receive enough training to undertake their role and people we spoke with told us care staff support them appropriately. We viewed records which showed care staff receive appropriate training. However, the provider is currently looking for further moving and handling training to supplement the training already undertaken. We saw staff recruitment is robust and care workers are registered with the appropriate bodies in regards their fitness to work. We saw evidence staff team meetings are undertaken; however, these need to be held more frequently.

Arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations. Information, and views of people obtained are used for the continued development and improvement of the service. A six-monthly quality assurance review has been completed in line with regulations which considers the views of people using the service to ensure people are satisfied with the service they receive. We saw the RI undertakes their three-monthly reviews of the service appropriately. We saw senior managers have a comprehensive range of audits, such as personal plan reviews, to ensure the home is run effectively. We viewed evidence of processes which are in place which ensures the manager receives appropriate support from the RI and that the provider is kept abreast of any issues at the home on a weekly basis. There are a range of policies, such as safeguarding, infection control and medication, in place to ensure the service is run safely and as intended.

People can be confident senior managers take issues seriously and work to a high standard. One person told us *"The manager is smashing...he is really good."* Care staff told us managers take issues seriously and they receive good support from management. A member of the care team told us *"The manager is professional and helpful...managers are approachable and give support."* Another care worker said, *"Concerns would be listened to...managers take issues seriously."*

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 inspection	N/A
-----	--	-----

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 21/12/2023