



## Inspection Report on

**Lynnefield care home**

**Lynfield Care Home Ltd  
25 Pembroke Road  
Haverfordwest  
SA61 1JW**

## **Date Inspection Completed**

14/05/2024

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## About Lynnefield care home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rusev Care Ltd
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	23 May 2023
Does this service promote Welsh language and culture?	The service does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

Representatives have a high level of confidence in Lynnefield and consider the decision for individuals to move into the service has been a good one.

People who have made Lynnefield their home receive care from workers who are suitably trained; feel valued and are motivated. They are effectively led by an experienced manager and deputy.

Comprehensive support plans, together with the knowledge workers have for people mean people receive person centred care in a patient and kind way.

## Well-being

People are safe and protected from abuse, harm and neglect. Care workers know their responsibilities in relation to safeguarding and are confident the manager would deal with any safeguarding concerns correctly. The front door is kept locked and visitors are required to sign in, so staff know who is in the service at all times. The gardens are safe and secure.

The environment contributes to some degree to people's wellbeing. Some improvements have been made and others planned. People appreciate the homeliness of the service but greater attention to detail would enhance the environment further.

People have good relationships with those who care for them. One representative described individual staff as "*exceptional*" and another said "*the majority of staff are really friendly*". Representatives are particularly complimentary about the deputy manager. Interactions between people and those caring for them are friendly and relaxed and workers have a good knowledge of what and who is important to them.

People can mostly do things that matter to them. There are some opportunities for them to engage in meaningful activities and people can mostly make choices about aspects of their care and support, but the provider is required to make sure people's rights to make choices are upheld.

## Care and Support

Care records are person centred and comprehensive. Each person has a detailed personal history which sets out who and what is important to them. The care and support people need is clearly documented and there are care plans for a range of areas including nutrition, sleep and mobility. Oral care assessments are carried out and records are regularly reviewed. Care workers have time to read the records and find them helpful.

People's physical health needs are met. A district nurse visits regularly and appointments are made with other health professionals as necessary. A podiatrist visits regularly. People's weight is monitored and there is enough pressure relieving and moving & handling equipment. Representatives are informed about any changes.

There are some opportunities for people to exercise choice. They go to bed and get up when they choose and also decide when to have their personal care. Some people consider there are enough activities and opportunities for meaningful engagement, but others think more are needed. Activities include visiting entertainers and care workers spending time with people playing games and doing some chair exercises. One person told us they *"never get bored here"* but another said *"we do get a bit bored"*. There is a disconnect between what some of the care workers and the manager told us, regarding choice and the provider is required to ensure that any restrictions on people's individual choices are done so with the appropriate legal authority.

There is an understanding of the importance of good nutrition. Meals are made using fresh ingredients and special diets and special occasions are catered for. Food cupboards are well stocked and care workers are satisfied with the quality of the ingredients. There is a choice of meals and staff are flexible to accommodate people's likes and dislikes. People are generally satisfied with the meals with one describing the meals as *"very nice"*. One representative said they *"smell delicious"*. and another said the food is *"amazing"*. Most people can be accommodated in the dining room and some people choose to eat the meals in the lounge of their own room.

## Environment

People live in a service which is suitable for their needs. Accommodation is on one floor making it easier for people to move freely throughout the service.

There are no malodours and standards of cleanliness are good. A housekeeper as well as care workers are responsible for keeping the service clean. The temperature in the service is very warm throughout and more consideration should be given to increasing the amount of fresh air.

Some rooms have been redecorated but greater attention to detail is needed. The service has a homely, but dated feel and the planned programme of redecoration and refurbishment should be accelerated.

The kitchen has been awarded a score of four by the Food Standards Agency which equates to a rating of Good.

There are some robust processes in place to make sure equipment and services are checked and this includes checks to fire safety equipment and emergency lighting.

There is some outdoor space for people to enjoy when the weather permits. The gardens are safe and secure but in need of some general maintenance.

## Leadership and Management

The RI has good oversight of the service. There are some effective and robust governance arrangements and the views of people, and their relatives are sought. Feedback is almost wholly positive with people feeling safe in the service and relatives feeling welcome and confident that care workers know people well.

In addition to the formal quality assurance process, people's views are recorded on a more informal basis and comments include "*The room is lovely... staff are kind and helpful*" and "*the staff are marvellous*".

A range of quality audits are carried out including checks of the physical environment; care files and health & safety.

The manager is very visible throughout the service and care workers feel confident to discuss any ideas or concerns they may have with, in the first instance, the deputy manager, who is considered to be both approachable and knowledgeable.

Staff are appointed following a safe recruitment process. Files are well organised and easy to navigate. They contain the information needed including references and security checks.

Care workers consider they have the training they need to be able to do their job safely and effectively. Training is mainly offered online and areas covered include Moving & Handling; dementia care; challenging behaviour and nutrition. Some training was completed some time ago but most is up to date. Almost all care workers are registered with Social Care Wales.

Supervision is carried out and care workers say they get feedback on their work and while most think they get balanced feedback and recognised for their contribution, some think it could be more balanced as they feel they tend only to have areas where improvements are needed, and not the areas where they are doing well.

Summary of Non-Compliance	
Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
36	Supervision records show one staff member had supervision more than 12 months ago. One staff member said they have received supervision once in a year. The supervision matrix shows supervision is not being carried out at least quarterly.	Achieved

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