



## Inspection Report on

**Fairfield nursing home**

**Fairfield Nursing Home  
Church Road  
Johnston  
Haverfordwest  
SA62 3HE**

## **Date Inspection Completed**

08/01/2024

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## About Fairfield nursing home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	fairfield nursing home limited
Registered places	43
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">23<sup>rd</sup> January, 2023</a>
Does this service promote Welsh language and culture?	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

Fairfield Nursing Home provides good-quality care from motivated care staff, with whom people have developed positive relationships. People are treated with dignity and respect. People have choice on how they spend their time, with varied opportunities for people to take part in activities.

The environment is safe, secure and maintained. The service uses the space to support peoples' well-being.

Arrangements for the effective management and oversight of the service are in place. The Responsible Individual (RI) consults with people about the service. The RI completes a detailed Quality of Care Review which notes improvements to be made at the service.

## Well-being

People live with dignity and respect and receive appropriate, kind, and caring support from care staff they know. Staff enjoy spending time with people. People can communicate in Welsh, to Welsh speaking care staff. Meaningful interactions were observed. Individuals and representatives told us that care staff are good, make you feel safe and respond to any issues. A person using the service told us, *“They couldn’t be more helpful here...they look after me well.”* A family representative told us, *“Really happy with the place. They do everything they say. The staff are lovely.”*

People are happy and can do the things that make them happy. Empathy and care is shown to people, who have as much autonomy over their own lives as possible. People benefit from activities being organised and enjoy the choice of foods available at the service. A person who uses the service told us, *“The food is great. The curry particularly... [There is] always something to do. I love it here.”* Care staff encourage people to make daily choices and decisions about how they spend their time. The service employs an activities co-ordinator and people are supported to access individual or group activities of their choosing. Care staff have good rapport and professional relationships with people and interact in positive ways. Pets are present at the service, which further promotes good well-being.

People are safe, protected, and receive care and support from care staff who have been safely recruited. Care staff are well-trained, supported and are appropriately registered with Social Care Wales or the Nursing Midwifery Council, the workforce regulators. Care staff know how to raise concerns. People and their representatives know how to raise a complaint and have confidence in this being dealt with by the manager.

## Care and Support

People are complimentary about the care and support they receive at the service. The process for admitting new people into the service is well-planned. Personal plans are person-centred and contain all the information required to enable care staff to meet the needs of people. People's wishes of how their support should be provided are documented. Personal plans are kept under regular review and updated as required. Individuals and their representatives are involved in developing their personal plans, where possible. A person using the service told us, *"It's a good spot...I feel safe here."*

Care staff are committed, kind and caring. People benefit from care and support as detailed in their personal plans. The service benefits from the retention of some long-serving care staff. The service does not routinely rely on agency staff, which allows for consistent staff to develop relationships with people they support. Care staff are knowledgeable about the people in their care and are patient in their approach. A person using the service told us, *"The staff are good...people are nice."*

People choose where to spend their time throughout the day. We saw some people preferred to stay in their own rooms and others sat in the communal areas. An activities coordinator is employed. We saw that group activities are well attended, and people enjoy participating. We were told that some people have one to one activity in their room, which they prefer.

People's physical health and overall well-being is promoted. Care records show people receive support to access social and health care professionals when needed. The service understands people's health conditions, the support they require and can promptly identify changes in the usual presentation of people they support. People are supported to maintain a healthy weight and diets are reviewed when required. People are encouraged to be as healthy as possible. An external health professional told us, *"The rapport with residents is lovely... I have never seen any instances of poor practice."*

People are protected from harm and abuse. Care staff have completed safeguarding training and have a clear understanding of how to report matters of a safeguarding nature. A person using the service told us, *"You can talk to the manager and the staff. I would if I had a problem, but I don't have any."*

Infection prevention and control procedures are good. Care staff have access to personal protective equipment (PPE) if required. Medication is managed safely. Medication is stored safely and care staff complete medication records accurately. Medication audits are completed regularly, and controlled drugs are appropriately recorded.

## Environment

The environment supports people to achieve their personal outcomes. The home is welcoming, comfortable, clean and has a relaxed atmosphere. The home provides space for socialising, with comfortable communal living areas. Visiting is unrestricted and people can meet with their family members whenever they want, in their own rooms or in one of the communal areas. Rooms are decorated to people's personal preferences and interests if they choose. Individuals have photos of loved ones, keepsakes, and ornaments.

People benefit from a safe and secure environment. We saw sufficient oversight of health and safety at the service. Appropriate arrangements are in place to ensure risks to people's health and safety are identified and dealt with. Records show checks are carried out around the home to identify and address issues promptly. The service has a maintenance worker with arrangements in place for ongoing maintenance of the service. People are safe from unauthorised visitors entering the building, with visitors having to ring the door to gain access to the service.

The service promotes people's safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. Fire drills and fire alarm checks are conducted within the required frequency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good. Hygienic practices are followed and the service manages the risk of infection. We saw Personal Protective Equipment (PPE) and hand sanitising stations located around the home.

## Leadership and Management

Effective oversight ensures a good-quality service, focussed on meeting the needs of individuals and promoting their wellbeing. The responsible individual (RI) visits the service and spends time talking to people. The service routinely seeks the views of people about the care and support provided. The most recent quality of care review identifies areas for development and improvement. The statement of purpose (SoP) clearly states what people can expect from the service.

The manager is suitably qualified for the role and is registered with Social Care Wales, the social care workforce regulator. The manager knows people well and demonstrates commitment to providing good leadership, ensuring effective day-to-day management and oversight of the service. The manager is supported closely by two deputy managers. The service is in regular communication with the responsible individual (RI). Care staff team meetings support the provision of good-quality care. Care staff told us that the management team are approachable and always there to help or advise when required. A member of care staff told us, *“The management are great...they are really supportive of us and our development.”*

The service has systems in place for the safe recruitment of staff. Disclosure and Barring Security (DBS) checks are in place and current. Care staff are registered with Social Care Wales, the workforce regulator. Staff personnel files contain all the information required by Regulations to ensure they are safe and fit to work at the service.

Newly appointed care staff complete an induction programme which includes training, shadow shifts and competency checks to ensure they can perform specific care tasks. Care staff training records indicate care staff have access to a variety of training opportunities, and care staff have completed a good level of training. The management value professional development and seek opportunities for staff to enhance their skills and knowledge.

Care staff are provided with support, through team meetings, supervisions and annual appraisals. A member of care staff told us *“I get to talk about how things are and what I need [to develop]. I’m really happy here.”* Management offers daily support to care staff when required, undertakes spot checks and quality monitoring checks.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
66	<p>Personal profiles/pen pictures are not available for everyone living at the service. This means care workers are not always aware of people's backgrounds as well as who and what is important to them. Daily care sheets are not used to inform the daily records. When people's daily fluid intake is insufficient this is not reflected in the care records. The daily care records and care sheets do not always inform people's care plans. Outcomes from participation in activities is not recorded. Participation is recorded in a separate diary which is not always available for staff to refer to. Gaps and omissions have not been picked up as part of the general quality monitoring. The same issues were identified at the previous inspection in November 2021 and no progress has been made.</p>	Achieved

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