



# Inspection Report on

**Meadows Nursing Home**

**Meadows Emi Home  
Church Road  
Johnston  
Haverfordwest  
SA62 3HE**

**Date Inspection Completed**

20/02/2023

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## About Meadows Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Meadows Nursing Home Ltd
Registered places	59
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

People and their relatives are mostly happy with the care and support offered at The Meadows with one saying *"I can't speak highly enough of them"* and another said *"it's the best place for X"*. Another relative, however, was less complimentary describing the service as *"not the best, but not the worst"*.

The service is skilfully managed by an experienced manager who is responsive to ideas and ways to improve the service. One relative describes the manager as *"lovely"* and all the staff we spoke with describe the manager as helpful and supportive.

The manager is supported by both the Responsible Individual (RI) and the Chief Executive (CEO).

There are a number of plans to improve several areas of the service, including the physical environment; general administration; activities and record keeping and once completed should result in further improvements for people.

## Well-being

People are safe. Staff know their responsibilities to report any safeguarding concerns they have, and are confident their manager will deal with any such concerns appropriately. Entry to, and exit from, the service is controlled by staff meaning they know who is in the property at all times. People receive care and support from staff who know them. This is evident from the way care staff interact with people, diffusing situations with skill.

Staff are described by relatives as “*caring*”; “*friendly*” and “*considerate*” with one describing the staff team as “*like an extension of the family*”. Most relatives consider staff have time for people, but some consider staff are too busy to sit and chat. Care workers say care is never rushed and takes as long as necessary, understanding the importance of choice.

The environment contributes to people’s well-being to some extent. It is clean, light and airy, but some general maintenance; repairs and greater attention to detail will enhance this further.

The importance of activities and engagement is understood. A new activities worker has been appointed and tasked with spending time with people both individually and in groups, to either take part in activities, or to engage on a one to one basis to help make people’s days more meaningful.

## Care and Support

People's physical health needs are met. Care workers understand the importance of maintaining good oral hygiene with some attention to detail. Care workers know how to recognise signs of pressure damage and say they have the equipment they need to reduce the risk of pressure sores. Dental and opticians appointments are arranged where necessary. People's weight is monitored and referrals made to specialists as required. Clear rationales are provided when people's weight changes significantly. Medication is administered as prescribed.

Electronic care records are maintained. Care plans are detailed but the language used is not always reflective of person-centred care. The system is new and the manager is working with the company to work through any initial issues to ensure the system is as effective as possible. Care staff do find the system helpful and informative and have time to read the records.

Although improvements have been noted since the last inspection, further improvements could be beneficial for people. Care staff have been tasked with completing personal profiles, which sets out what and who is important to the person as well as making sure the care plans are more personal and person-centred. The provider is also asked to ensure people's repositioning needs are met in accordance with their care plans. We discussed this with the manager who said this is down to gaps in recording and is confident repositioning is carried out and this is corroborated by nursing staff.

The service understands the importance of good nutrition. The chef takes pride in their work and is satisfied with the quality of ingredients. Meals are made mostly using fresh ingredients with little reliance on processed food. There is a choice of meal and food is available outside mealtimes. Most people need their food to be fortified and sandwiches are available because the service has found people living with dementia often find these easier to eat with a greater level of independence. People are assisted to eat when necessary, and most care workers do this appropriately, sitting alongside the person.

Most people in the Meadows part of the service use the dining room. We discussed the benefits for people in the Willows to use the dining tables for their meals and noted that on the second day of the inspection, the furniture had been rearranged and more people were using the dining tables. This demonstrates the manager is responsive to suggestions and ways to enhance people's quality of care. One relative describes the menu as "*superb*". Some relatives assist people with their meals, but one relative said they had been prevented from doing so. We discussed this with the manager and it appears there has been some misunderstanding and due to the restrictions imposed by the pandemic, with the person's partner now being able to assist.

Special events are celebrated, with afternoon tea planned for Valentine's and Mother's Days, when relatives will be invited to share the occasion. Birthdays are also celebrated with the chef making a cake and a party tea where appropriate.

The manager and catering team have written a helpful, and comprehensive record which sets out people's likes; dislikes; any assistance needed and special diets.

Most people are generally satisfied with the meals with one describing them as "*pretty fair*" and another said they are "*good*".

There are some opportunities for people to do things they enjoy. A new activities worker has been appointed and is currently building a schedule of activities. During the inspection people were having their nails painted and an activity was being planned to make decorations in readiness for St David's Day. Outside entertainers visit the service including singers and some animals which people really enjoy. The activities worker spends time with people in their rooms and individually, as well as in groups

Some people want more activities, but others are satisfied with the frequency of them. The designated worker is researching activities which could be beneficial for people living with dementia.

Care notes do not provide evidence of engagement in activities, either individually or in groups.

## Environment

People live in a service which is suitable for their needs. Accommodation is provided over two floors and there is a lift for people to mobilise between the floors. Corridors are spacious and free of any obstructions and trip hazards. The service is light and airy with communal areas for people to spend their time, or they may choose to spend time in their bedrooms.

Most of the service is in good decorative order, but some parts would benefit from some repair and maintenance. There is a small area of mould in one of the bathrooms which has also been noted by a relative. Some windows need replacing as they do not close properly. There is a plan to replace some of the windows and also to take up the carpet and replace this with vinyl flooring.

Greater attention to detail is needed as some curtains are not hung properly.

People have personalised their rooms with ornaments and photographs and there are some brightly painted doors to some people's rooms to help with orientation.

Some relatives feel improvements could be made to the laundry service. This is in respect of the products used as we were told some items have faded. Laundry is returned to people in a timely way after being washed and ironed.

The kitchen has a rating of three from the Food Standards Agency. Improvements have been made since this assessment and the service was being reinspected during our inspection. The kitchen appears clean and the staff have the equipment they need to carry out their duties. Cupboards and freezers are well stocked.

There is some outside space which is well used when the weather permits. But we saw parts are in need of general maintenance.

## Leadership and Management

There is good oversight of the service. The RI and CEO visit regularly and are available for support and advice at other times. The reports written by the RI are detailed; reflective and critical where necessary. They identify where the service is doing well, and also the areas where improvements are needed. The quality report completed by the manager highlights areas where relatives are satisfied, which include how calm the atmosphere is and how clean the service is, and also areas where improvements are needed, which include relatives contributing to people's care plans and being able to speak with a nurse.

Staff say they have the training they need to safely carry out their duties. The training matrix shows the training for care workers is mostly up to date, but there are gaps in the training for qualified staff. There is a dedicated trainer who is flexible in their approach and able to deliver training on a range of topics to fit in with the needs of the service. Handwashing training was due to take place the day after the inspection, with other sessions booked.

The supervision matrix indicates most staff have had supervision, but this is not always in line with Regulations. Some staff meetings are recorded as supervision when these are required to be one to one meetings between supervisor and supervisee. Records of supervision are not always available within the personnel record as they have not yet been filed. Staff do, however feel they get balanced feedback on their work.

Staff are appointed following a safe recruitment process. References are obtained and checks carried out. Staff have a period of induction, but the records of this are not always available in the staff files. This has been picked up as part of the routine quality audit and an action in place to address this.



### 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
21	<p>Care plans are not written following significant incidents. . Incidents are not always reported on. Advice is not always followed up on. One person was to have thickened fluids to reduce the risk of choking. This had not been implemented. Information can not be retrieved from the electronic records system. Records do not contain information about people's backgrounds and what matters to them. Audits are carried out but these shortfalls are not always picked up on. One care workers said they read people's records during their break and another said they had not seen the care records; does not know people's backgrounds and does not have time to read them.</p>	Achieved

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