



Inspection Report on

Meadows Nursing Home

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

Date Inspection Completed

19/07/2023

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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 | 20 February 2023 |
| 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 are happy with the service they receive. They are supported by a caring staff team, whom they have built up trusting relationships with. Issues with documentation in personal plans have been identified as an Area for Improvement. When discussing the service, a representative told us; *“It’s an excellent home, it’s a pleasure to go there. The staff are excellent”*.

The environment is comfortable and well maintained. The provider has an upgrade plan in place to improve the décor of the home. Communal rooms are well used by people to interact with each other, their visitors and staff.

The Responsible Individual (RI) visits the service regularly and is supported by a senior manager, who is well known by people who live and work at the service. Information from the RI’s Regulation 73 visits and audits inform their six-monthly quality of care review.

Well-being

People receive safe and effective care and support, that meets their needs. People do not always have a voice in the service they receive because they and/or their representatives are not involved in their personal plans. The manager involves health and social care professionals to enable people to remain as healthy as possible. People are respected and sensitively supported to do things that matter to them. People are encouraged to maintain contact with family and friends and enjoy meeting them regularly at the service.

Interactions between people and the staff team are caring and friendly. Representatives are positive about the care and support; one said *"We like the staff and they are like extended family, she's very well looked after"*. People are able to communicate in Welsh with some of the staff, who are bilingual.

People are protected because recruitment processes and training ensure they get the right care and support. Care workers receive induction and ongoing development and register with Social Care Wales. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and their representatives know how to make a complaint if needed and have confidence in the manager. A representative told us *"I could raise a complaint with [Manager] but I don't have any reason to"*.

The building is secure and people can safely access different areas of the home. People personalise their own rooms with photographs and ornaments as they choose. Communal areas are comfortable, bright and spacious. People walk around the home freely and can use the different spaces available to do things they enjoy. Gardens are accessible, so people can do things that keep them as healthy as possible.

People have a voice and input into the running of the service. The RI regularly visits the home and completes quarterly visit reports. Governance processes focus on developing the service by using information from internal audits. The Quality of Care Review identifies areas to improve following consultation with people, their representatives and staff.

Care and Support

People and their representatives are very happy with the standard of care and support they receive. The service supports people who live with dementia; all staff are sensitive to people's complex needs and communication challenges. Staff know people well, understand their needs and preferences. We saw many encouraging and friendly interactions between people who live and work at the home. A care worker told us *"The residents are so nice to talk to; we develop nice relationships with them"*. People's representatives are very positive about the care and support; one told us *"They are lovely, so kind and that's so reassuring"*.

The provider has an electronic care planning system, that sets out the care and nursing tasks that need to be completed. However, there is limited personalised information to guide staff around individual preferences and choices. Health professionals are involved in plans but people, their representatives and care workers are not sufficiently included in developing and maintaining them. Plans are reviewed every month but generally do not include feedback from people or their representatives. Daily notes record the care tasks completed but lack an account of the day from the perspective of the person. The manager has started to address the issues with documentation and is looking to make the most of the electronic system they have. However, we have identified this as an area for improvement and expect to see improvements in documentation.

The service offers opportunities to people that enable them to be engaged in activities in the home. A dedicated activities coordinator arranges stimulating group activities, small group or one-to-one sessions with people and external entertainers. During the visit we saw people happily singing and dancing along to a local singer, who was playing in the main lounge.

The service has utilised agency workers to ensure there are adequate staffing levels in place to meet people's needs. We observed many positive interactions during the inspection and a representative told us; *"I'm very impressed, they pay such good attention to people and look after them so well"*.

Environment

The environment is safe and well maintained by a dedicated maintenance and housekeeping team. The communal areas are used by people to interact with each other and the staff team. The doors to the service are secure to help protect individuals but people move around the internal areas of the home freely. The grounds are also secure to enable people to access them safely. The service has a large double room that can be used to enable couples to continue to live together. Individual rooms can be personalised by people with their own pictures and ornaments. Individual room doors are painted with bright distinctive colours to help people orientate around the building.

The provider has a planned upgrade programme and are currently painting internal areas of the building, with replacing flooring in the next phase of the plan. We were told that any issues are acted upon promptly and the provider ensures equipment is available for people and staff to use to maintain the service.

Visiting is unrestricted and people can meet with their family members whenever they want, in their own rooms or in one of the quieter communal lounges.

Regular health and safety audits of the property are consistently completed. Testing of fire safety equipment is up-to-date and Personal Evacuation Plans are individualised and useful in emergencies.

The kitchen has a food hygiene rating of five and people enjoy a variety of freshly prepared home cooked meals from which to choose. A representative told us *"Mum enjoys the food she's actually put on weight"*.

Leadership and Management

The provider has arrangements in place for monitoring, reviewing and improving the quality of the service. The Chief Executive provides day to day support to the service and the RI regularly visits the home, staff describe them as approachable and supportive. A care worker said *"[RI] has good conversations with us, he asks how things are going and how the residents are doing"*. Regulation 73 visits are completed every three months, but the visit reports do not evidence people, their representatives and staff are consulted with. The Quality of Care Review uses information from audits and questionnaires to develop an action plan to improve the service.

The manager is well known by the people who live at the service, we observed many positive interactions between them and individuals. Care workers describe the manager as accessible and supportive, one told us *"[Manager] is a good manager and I can always talk to her and she gives me confidence"*. Representatives told us the manager is approachable, easy to talk to and very helpful, one said *"I can always pick up the phone and she always makes herself available. I could raise a concern easily if needed"*.

Care workers told us they receive beneficial supervision, one described it as *"Chatting about the job, any changes needed. We are asked if we need more or new training, which is good"*. Discussions with staff, demonstrate a good understanding around reporting any safeguarding concerns. Procedures are in place to support good practice and staff have a sufficient understanding of key policies.

Pre-employment checks take place before new employees start work. These include references, right to work checks and Disclosure and Barring (DBS) checks. New staff receive a worthwhile induction and ongoing mandatory and person specific training to meet people's needs. Staff told us they receive training to meet people's needs and one said *"we do lots of training and it's really good"*. The manager supports staff to complete the 'All Wales Induction Framework for Health and Social Care' and to register with Social Care Wales.

Sufficient numbers of staff meet people's needs and staff take the time to interact with people as often as possible. Many care workers have been at the service for years and have built up positive relationships with people and understand their needs. When discussing the staff a representative told us *"They are lovely, so kind and that's so reassuring"*.

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 |
|------------|---------|--------|
|------------|---------|--------|

| | | |
|----|---|-----|
| 15 | <p>People do not have a voice in their care and support because they and or their representatives are not involved in developing or reviewing personal plans. Risk assessments do not always feed through into the care plan, meaning care workers may not be aware of the identified risk. Daily notes are a list of the care tasks completed and do not give an account of the day or support received from the individual's point of view to check progress against outcomes. The Manager is aware of the issues and will ensure that plans have person centred information available for staff to refer to. People and/or their representative will be involved in developing and reviewing plans. Senior staff to ensure daily notes have an account from the individuals point of view.</p> | New |
|----|---|-----|

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