



Inspection Report on

Fairhaven Care Home Ltd

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

Date Inspection Completed

30/12/2024

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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	8 December 2023
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 living at Fairhaven. Care is delivered by care workers who are safely recruited, well trained, and appropriately supervised. We observed positive interactions between all members of staff and people living at the service. Care records are person centred, detailed and relevant.

People have a voice in their home and said the provider listens to them. Feedback from individuals and family members we spoke with is positive.

There is a good management structure in place with systems which continuously monitor the quality and effectiveness of the service. The Responsible Individual (RI) is well informed and audits the service effectively as part of their regulatory visits.

Well-being

People have choice and control over their day to day lives. People can choose when to get up and go to bed, what they want to eat and drink and where they want to spend their time. People can access the community without restriction if it is safe to do so. We heard people making arrangements to go out to the shops or for a coffee with care workers and saw people also attend church. The service is part of the local community and welcomes groups to the service for activities and celebrations. There is an activities coordinator and a minibus so people can enjoy trips out. The service has a 'home committee' which three individuals are part of. They talk with other individuals and represent the views of everyone who lives at Fairhaven. We saw resident's meetings also offer people the opportunity to share their views about the service and contribute ideas about food, activities, trips out and decoration. The service has two pet guinea pigs which are popular with individuals and visitors. A pet therapy dog visits the service once a month. We saw risk assessments are in place regarding pets and animals at the service.

People are protected from abuse and neglect. Care workers complete safeguarding training and are supported by guidance within safeguarding policies. The manager records incidents, accidents, and safeguarding concerns which are reported to the RI weekly, audited monthly and reflected on quarterly and as part of the quality-of-care review. The manager has a good understanding of the safeguarding process and engages with local safeguarding teams as needed. Risk assessments are included within people's care records and support people to be as safe as they can be, whilst still ensuring they have choice and control.

Medication is managed safely within the service. The manager has a robust process for the ordering, storing and administration of medication. A recent audit by the pharmacy supplier was positive about the processes in place at the service. People have regular reviews of their medication with the GP or other relevant health care professionals.

Care and Support

People can be assured the provider has good processes in place to gather information about their care and support needs and to inform care workers about how to support them safely. The manager conducts initial assessments with people and or their representative to establish what care and support is needed and how they want this to look. Information gathered in this assessment process informs people's personal plans, which we found to be detailed, and person centred. We saw most people are involved in the creation and review of their care records. Electronic planning systems mean records are reviewed on a regular basis and staff are alerted to tasks which need attention.

People are supported with their overall wellbeing. People told us care workers support them to attend medical appointments which we observed on two occasions during our inspection. The manager told us they have a positive relationship with the local GP surgery and pharmacy which is important to ensure people are well and receive the medication they need. Records show external support is sought for areas such as diet and nutrition and tissue viability. People are supported to be clean and tidy. On the day of inspection, the hairdresser was visiting the service and people said they enjoyed this. Everyone we spoke with said they are supported with personal care and appeared clean and tidy. People benefit from a well organised laundry service which ensures their clothes are cared for and do not get lost.

People spoke positively about the support they receive. We observed care workers meeting the needs of people in a timely way and having fun with the people they were supporting. We were told most care workers have worked at the service for a long time, so they know people very well. We observed the mealtime experience where food was well presented, well portioned and nutritionally balanced. People confirmed they like the food at the service and could request specific things if they wanted. We saw these requests met. One family member told us *"You couldn't wish for better people, they are brilliant, can't fault them whatsoever."*

Environment

People live in a service which is equipped to promote independence and make people feel at home. We saw people choose to spend time in one of several communal areas or in their bedrooms. All areas of the service are accessible at ground level or by accessing the lift or stair lift. People are free to come and go from the service as they wish.

People have equipment in place which meets their needs and supports their independence, such as wheelchairs, walking frames and specialist seating. Moving and handling equipment, specialist beds and other support aids are well maintained and serviced as required.

The manager and provider ensure routine servicing of the environment are carried out. The provider has an ongoing plan of maintenance at the service which we were shown. To date, the provider has had a new lift installed, the roof has been replaced, several toilets have been refurbished and some bedrooms have been redecorated. We saw the work carried out so far has been completed to a high standard by the maintenance person for the service and this continues to be ongoing.

Leadership and Management

People live at a service which is safely staffed and well managed. The manager told us about the different systems in place which support the ongoing monitoring of the quality of the service. We reviewed a sample of these systems and found audits to be detailed and thorough with actions set where needed. The auditing systems look at all areas of service provision and are reviewed by the Responsible Individual (RI) during their quarterly visits. The manager has regular contact with the RI and sends a weekly summary giving an oversight of areas such as admissions, staffing, incidents and accidents and examples of best practice. The information from the audits and weekly reports supports the RI in reviewing the service and creating a report which we found to be detailed and included records of conversations with individuals and care staff.

People are supported by care workers who are safely recruited, well trained and supported in their role. We reviewed recruitment records and found all the required pre-employment checks to be in place, this includes disclosure and barring service checks (DBS) and reference requests. Care workers complete training and are supported to achieve professional qualifications. We found all care workers are registered with Social Care Wales, the workforce regulator. We found regular one to one supervision meetings take place with the manager. Regular staff meetings are held to share important messages with the team.

People spoke positively about the management of the service and told us when something is brought to their attention, they listen and act. Policies and procedures are in place to support best practice. The quality-of-care report summarises responses from questionnaires, what action is needed, who is responsible and when it will be met. The systems in place ensure effective oversight and demonstrate a commitment to providing people with a quality service.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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