

Oxford Care Homes Limited

Fairholme House

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Fairholme House is a residential care home providing personal care to 11 people aged 65 and over at the time of the inspection. The service can support up to 22 people.

People's experience of using this service and what we found

We received information raising concerns about moving and handling practices, the cleanliness of the home, people not being reviewed when they have weight issues, storage of medicines and the registered manager and provider not addressing issues when they were brought to their attention.

We found people were being mobilised safely and relevant documents were in place to ensure staff followed these when supporting people. The kitchen and various rooms we viewed were clean and there was a cleaning schedule in place. Medicines were stored appropriately and safely. People's weight was checked on a regular basis and where there were concerns external professional advice was sought. There was no evidence that issues brought to the attention of the registered manager and provider were not addressed. Staff were positive about the registered manager being approachable and listening to their views.

People and a visiting professional gave us positive feedback about the home. People confirmed the staff were kind and the registered manager was available to talk with.

There were staff vacancies and regular agency staff were used as and when this was necessary. The registered manager worked alongside staff to help ensure people were safely supported. The registered manager was finding it challenging to carry out all the managerial duties and this was discussed during the inspection with the provider. Plans were underway to develop a new role to support the registered manager.

We looked at the preparedness of care homes in relation to infection prevention and control. We found the following examples of good practice in relation to infection control. People could see visitors safely either in the garden or in a designated room. Visitors took a COVID-19 test and their temperatures were taken to minimise the risk to people and staff. Staff had a good supply of personal protective equipment (PPE) to help protect the people they were supporting.

Further information is in the detailed findings below.

Rating at last inspection The last rating for this service was good (published 11 January 2018).

Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in response to concerns received about storage of medicines, the cleanliness of the home, how people at the service were being kept safe and how the registered manager and provider responded when issues were brought to their attention. A decision was made for us to inspect

and examine those risks. We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe, effective and well led section of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Fairholme House on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service effective?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Fairholme House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements relating to the specific concerns we had about the storage of medicines, the cleanliness of the home, how people at the service were being kept safe when they were being mobilised and how the registered manager and provider responded when issues were brought to their attention.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

Fairholme House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced. We telephoned the service just before arriving at the home to check if anyone at the service was COVID-19 positive or had symptoms.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used this information to plan our inspection.

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During the inspection

We spoke with three people who used the service and one health care professional. We had also received feedback from a second health care professional just prior to the inspection. We spoke with one member of staff, the provider and the registered manager.

We reviewed a range of records. This included four people's care records, in particular moving and handling risk assessments and two people's weight records. A variety of records relating to the management of the service, including the cleaning schedule and medicine audits were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- People's care records contained information on how to manage risks. This included supporting people to mobilise safely and it was clear if people required two staff to help them and what equipment was needed to ensure people were kept safe.
- Staff knew people's needs well which meant they were able to identify any changes or triggers promptly. One person confirmed, "Staff move me in a confident way."
- Records noted what people could do independently, for example if they had upper body strength, along with if the person could verbally say how they wanted to be moved.
- A health care professional commented favourably about the home. They said, "Staff know people's needs."

Using medicines safely

- We checked where the medicines that needed to be returned to the pharmacist was stored. This was locked safely in a separate room to the main medicines cupboard and posed no threat to the people living in the home.
- Various medicines checks were in place and the registered manager carried out a medicine audit shortly after the inspection and no issues were identified. 'As required' (PRN) medicine protocols were developed to inform staff on why a person was prescribed this specific type of medicine and when to administer this.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.

- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- Overall, the home was clean with no malodours. Where we observed an area could be cleaner this was addressed by the manager and cleaned. People told us their bedrooms were cleaned and they were happy with the cleanliness of the home. One person said, "Always very clean, no concerns."
- The home had cleaning procedures in place, and this included cleaning regularly high touch points to minimise the risk of infection. The provider was reviewing the role of the cleaner to ascertain if changes needed to be made or more staff needed to be recruited to this role to ensure the home was cleaned effectively.
- We observed a person receiving a visitor and this took place outside so that both parties minimised the risk to anyone. People told us they were happy now they could see their family and the home supported them to do so safely.

Staffing and recruitment

- People told us there were enough staff working in the home to support them and to chat with. A healthcare professional who was visiting the home, said there "Seems to be enough staff."
- The registered manager confirmed there were no changes to the recruitment processes since the last inspection and so on this occasion, as we had no known concerns, we did not check recruitment at this inspection.
- Recently two night staff had left at short notice, and the registered manager was working alongside staff providing support to people. The recruitment of staff was an ongoing part of running the home and the registered manager and provider recognised this was a priority.
- The provider was currently reviewing the staff structure to consider developing a new post which would aim to support the registered manager and share out tasks.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

Supporting people to eat and drink enough to maintain a balanced diet

- People's care plans reflected details of their diets and preferences. Comments from people were positive about the meals. One person said, "I'm happy with the meals, and we get a choice."
- People were weighed each month so staff could respond to changes. Where a person was underweight we saw records confirming the GP was informed. The registered manager had given written instructions to the kitchen staff on how to increase the person's weight, for example giving them cream and high calorie foods.

Adapting service, design, decoration to meet people's needs

- People were happy with their bedrooms and the various communal areas they could sit in. One person told us, "There is plenty of space to sit in quiet areas of the home if you don't want to sit in your bedroom."
- We viewed a sample of rooms around the home. We noted the home was spacious but in need of some painting and on one stair carpet the carpet was becoming threadbare, but was not a trip hazard. The registered provider had a refurbishment plan in place and was working through this to ensure the home maintained a safe and homely feel.
- Action was taken where there were issues with the environment. For example, where one person's bedroom carpet needed to be changed in order for staff to move the person easily with the hoist, plans were in place for the following week to change the carpet. Another person, where they also required a hoist, had vinyl flooring on their bedroom floor making it easy to keep clean and use a hoist.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Whilst staff were happy with the running of the home they told us the registered manager worked hard and that they needed more support from the provider. We spoke with the provider about this, who acknowledged it had been challenging for all staff during the COVID-19 pandemic and they were looking to develop a new role to help the registered manager.
- People said they felt happy to raise any issues with the registered manager and one person said "If I was unhappy we would talk with the manager, she sorts things out." Another person confirmed, "Staff listen to me."
- The registered provider sent us a sample of emails from relatives who had given their feedback about the home. These clearly showed the staff had looked after people in a kind and caring way which achieved good outcomes for people.
- The staff team knew people's needs and wishes well and had formed positive relationships with people. The registered manager worked directly supporting people and this helped with ensuring person-centred care was at the centre of the work staff carried out. A staff member and health care professional told us "I would place a relative here."
- Staff told us that although they did not meet as a group, which the provider confirmed, detailed handovers took place during shift changes to maintain open communication about the people living in the home.