

Methodist Homes

The Fairways Retirement Village

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Fairways Retirement Village provides personal care to people living in their own home. The Retirement Village consists of apartments which people have individually purchased. The service is managed by the MHA group which is a charitable organisation. At the time of this inspection 13 people were using the service.

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

People felt safe and relatives had no concerns about safety. Potential risks had been identified and action taken to mitigate them. Staff had undertaken safeguarding training and were aware of their responsibilities to identify and report potential abuse.

People were supported by sufficient numbers of suitably trained staff.

Medicine systems were safe. Prompt action was taken by the registered manager following feedback on the findings of the inspection.

The service had good infection prevention systems in place. People and staff felt well supported and safe during the height of the pandemic and had access to the appropriate personal protective equipment required.

The service was well led. There was a registered manager at the home who maintained oversight. People and staff had regular meetings to discuss their views, if needed, actions were identified and acted on.

The registered manager provided good support for staff to be able to do their job effectively. The provider's quality assurance processes were effective and had resulted in improvements to the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 20 May 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of any regulations.

Why we inspected

This was a planned inspection based on the previous rating.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Fairways Retirement Village 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

The Fairways Retirement Village

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection team consisted of one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own retirement apartments.

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

We gave the service short notice of the inspection. This was to ensure the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and one relative about their experience of the care provided. We spoke with seven members of staff including the registered manager.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had been in breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was due to not always managing medicines safely. An action plan was sent by the provider to detail how they would address these outstanding concerns. At this inspection the provider had made the necessary improvements and was no longer in breach of this Regulation.

- Medicines were being managed safely. Following the last inspection staff had all received face to face re-training and an action plan was developed in response to the concerns which was ticked off as completed. We saw that lessons learnt were recorded and further safety checks had been implemented. A tracker was in place to record any medicine errors and themes could be identified in order to put further actions in place.
- People had medicine care plans available that recorded the support they needed to take their medicines and a needs assessment of their understanding of the medicines they required.
- A list of staff trained and authorised to administer medicines was recorded. Staff completed an annual assessment to ensure they remained competent to administer medicines.
- Staff completed daily check lists to ensure all the required care and support had been provided. This included checking the medicine administration charts were signed and completed appropriately. Body maps were in place to show staff where to administer any prescribed topical medicines people had.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe living at The Fairways Retirement Village and staff were always available to help them. Comments included, "Absolutely safe, there is excellent protection and "I am happy and yes I feel safe." One relative told us, "I feel that my relative is not only safe but cared for well and respected. They care for the individual as a person. The care is inclusive and takes into account [Relative's] choices and preferences."
- Staff had the training, knowledge and confidence to identify safeguarding concerns and acted on these to keep people safe. Staff told us, "If I saw someone at risk of harm, I would firstly speak to my manager. If not, available I could contact the area manager, Wiltshire Council safeguarding services, the police or CQC" and "I have had training and would act straight away. If we notice something out of place even if it comes back to be nothing, its' always important to act on it."

Assessing risk, safety monitoring and management

- Risks to people's personal safety had been assessed and plans were in place to minimise these risks. There was good information available to record people's mobility concerns and post monitoring following a fall.

- Following the last inspection staff had completed a course on supporting people with behaviour needs and risk assessments as part of the service's improvement and action plan. Staff demonstrated a good understanding of risk management and told us communication was good when a person's needs had changed. One staff said, "There is always a handover and staff would tell you to read the care plan, make notes. Or say come in early for an update."
- Transfer forms were in people's care plans in case they needed to transfer to a different setting. These contained essential information about the person including clear information around their support and communication needs.
- Two people being supported were at higher risk of pressure ulcers. We saw although there was information in their care plans about this risk there was not a skin integrity risk assessment. The registered manager explained for one person the risk had recently increased and they had put in place a skin inspection chart for staff to complete. The district nurses visited twice a week and staff knew to contact them with any changes or concerns. Following this inspection, the registered manager sent us a copy of the risk assessment they had immediately put in place and held a meeting to inform staff of this change.

Staffing and recruitment

- People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. People told us, "The staff are very good. We have a good laugh with them. Staff come on time" and "Staff are very helpful." One relative told us, "The staff always spend time with [Relative], if she does not require her shower, the time is spent having a coffee together and a chat, so very important."
- Staff told us the staffing levels were good and they could spend quality time with people. Comments included, "Definitely enough staff, I never feel rushed" and "We have enough staff and time to ensure every individual we provide care for receives it. We have never had an incident where a visit hasn't happened."
- We saw that safe employment checks had been made to ensure staff were of good character and suitable for their role.
- Two staff did not have their identification documents signed and dated when the originals had been seen. The registered manager had a quality report that had picked this up previously and one action had been to review 10% of all staff files. The ones checked had been signed and dated. The registered manager said that on noticing an issue they should have rechecked all the files instead of 10% and that this would be rectified immediately.

Preventing and controlling infection

- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- The service was clean and tidy. There was good availability of PPE (personal protective equipment) and we observed staff using these appropriately. Staff told us they had been well supported and always had good access to PPE commenting, "I have felt safe, had all the PPE and they kept us well informed of any changes", "I have felt supported, the management and office staff are a really good support network, no PPE shortages."
- We saw individual staff COVID-19 risk assessments to identify any staff at increased risk were in place alongside the provider's infection control policy. Increased cleaning of high touch point areas was being undertaken and screens had been put in place in the office to separate staff.
- Communal areas in the service had been closed and were due to reopen shortly in line with the Government regulations. During this time the registered manager had ensured some essential items including bread and milk were bought and available for people and offered shopping support where needed. One person told us, "Staff have worn PPE when visiting. There has been very good communication and they have informed us on what's happening."
- Staff completed infection control training annually and we saw this had been refreshed. In addition, staff

had undertaken practical handwashing and infection prevention and control COVID-19 training. The registered manager had set up a COVID-19 communication folder with updates available for staff and attended regular leadership meetings with senior management.

Learning lessons when things go wrong

- Accidents and incidents were recorded and reviewed by the registered manager. These records were analysed for any trends and patterns in order to reduce future risk.
- Staff had the opportunity to discuss and learn from any incidents. Staff commented, "I have been trained into what to do to record and report incidents when they occur", "We haven't had many medicine errors, but the registered manager does lessons learnt and they have reduced dramatically and that's because of the conversations we have around things. Doing more training and this reinforces what we know."
- The registered manager told us, "Staff do report things to me and if they stopped, I would worry, and this would flag up. We discuss incidents on a daily basis, we talk to all staff, so they are vigilant. Our handovers record any concerns and staff know to check this file."

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service had a positive culture that was person-centred and inclusive. The registered manager praised the staff team saying, "The staff are well trained, kind and caring and its demonstrated over the last year with the dedication of coming in, getting on and remaining positive." One relative told us, "It's a very well managed service, alarms are checked on a frequent basis, the site buildings and gardens are well kept."
- People were all aware of the registered manager and felt the leadership in the service was good. People told us, "I see the registered manager around, she's very approachable and does regular meetings" and "I would absolutely recommend it here, they have a very good team in the office with the manager and other staff."
- Staff were happy in their roles and spoke positively about the registered manager and the support they received commenting, "Management are approachable. They are really caring and supportive. I really respect that as I've never had that before", "Our manager, has been very supportive throughout the pandemic keeping us constantly updated with new guidelines and procedures" and "My manager is very approachable and I could talk to her about anything and she would listen to me."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had notified CQC about significant events. We used this information to monitor the service and ensure they responded appropriately to keep people safe
- One staff commented, "My Manager, is very approachable. She listens, advises when needed and has an open-door policy which I find great and very helpful. She communicates well and keeps us constantly updated with all changes which has being a challenge during COVID-19."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Quality assurance systems were in place to monitor the quality of service being delivered and the running of the service. A monthly report was completed and sent to the area manager for oversight of the service. The registered manager told us the area manager was supportive and always available when needed.
- We saw that internal audits had identified shortfalls and action had been taken as a result to improve the service.
- A safety alert folder was in place which contained different alerts that had been received relating to things including PPE and medicines updates.

- There was good communication between the management and staff team which enabled good working relationships and staff were clear about their roles and responsibilities.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and those important to them had opportunities to feedback their views about the quality of the service they received. One person told us, "I think my views are listened to. I made some suggestions a while back and they were listened to."
- People and relatives praised the communication they received from the management and staff team with one relative commenting, "Communication has always been outstanding, from regular contact via email, telephone, face to face and with the very frequent newsletter for residents. It's so comforting to know the staff are interested in [Relative] and taking account of what she likes."
- Staff meetings had continued online during the pandemic and this was being taken forward in addition to face to face meetings as had worked well. The registered manager told us, "We have a wellbeing tool and a support line within the company which staff all have access to. We have worked well together and supported each other, and it's been a comfort to come to work and have that normal."

Continuous learning and improving care

- All of the people and staff that we spoke with told us they could not think of any improvements that needed to be made at this time and were happy.
- The registered manager said they continued to monitor and audit the service and at this moment in time they were comfortable that the service was managing well. There had been positive improvements taken to address the concerns raised at the last inspection.
- During the pandemic staff had all completed person-centred care training to further develop their skills and knowledge.

Working in partnership with others

- We saw evidence in people's care plans that health professionals were involved with their care needs where appropriate.
- The registered manager told us they were happy to talk and work with any professionals if needed.