

Feather-Stone Care Limited Feather-Stone Care

Inspection report

Office 3, St. Lukes Centre Main Road, Duston Northampton NN5 6JB Date of inspection visit: 17 August 2020 19 August 2020 20 August 2020

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Ratings

Tel: 01604967678

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

Feather-Stone Care is a supported living service, supporting nine people with learning disabilities across five different properties.

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

People who used the service told us they felt safe. They told us staff treated them well and they knew who the registered manager was. People's relatives and partnership agencies told us they were happy with the service and felt that people had made good progress since they had begun using the service.

Safeguarding investigations were completed as required and appropriate action was taken when staff had not met expectations. There were suitable numbers of appropriately recruited staff available to ensure people could complete activities they enjoyed. Risk assessments were in place to support people to receive safe care.

The management team were striving to improve the culture within the service and took an open and transparent approach when incidents occurred. The management team were eager to learn and share good practice and this helped people to make good progress. Systems were in place to audit the care provided and to seek feedback from people involved with the service.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection:

The last rating for this service was good (published 11 May 2018).

Why we inspected

This inspection was prompted in part due to concerns we received about staffing and if people were put at risk because of this. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has not changed following this focused inspection and remains Good.

What happens next?

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 •
Is the service well-led? The service was well-led.	Good •



Feather-Stone Care

Detailed findings

Background to this inspection

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in five 'supported living' settings. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. Registered managers and providers have legal responsibilities for how they run the service and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection visit. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection, particularly in light of Covid-19.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority.

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 this information to plan our inspection.

During the inspection

We spoke with four people who used the service, four people's relatives and three members of care staff. We

also received feedback from a healthcare professional involved with the service and spoke with both registered managers.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good.

This meant people were safe and protected from avoidable harm.

Safeguarding people from the risk from abuse

- People told us they felt safe receiving their support from the service.
- Safeguarding systems were in place to reduce the risk of abuse.
- Safeguarding investigations were completed comprehensively, and learning was identified to prevent similar occurrences.

Assessing and managing risks

- People had risk assessments in place which supported them to be independent and take positive risks.
- Staff understood people's risk assessments and how they could keep people safe. One member of staff said, "We try to help people keep calm and deescalate any situations before they begin."
- People's relatives were reassured by the measures staff took to keep people safe. One relative said, "They're safe. The staff are doing more now to keep them safe because of Covid and they're doing a damn good job."

Staffing; Recruitment

- People were supported by appropriately recruited staff.
- Appropriate background checks were completed on staff including references and Disclosure and Barring Service (DBS) checks. The DBS carry out a criminal record and barring check on individuals who intend to work with vulnerable adults, to help employers make safer recruitment decisions.
- There were sufficient numbers of staff to ensure people received the care they required. The provider acknowledged the challenges Covid-19 had had on maintaining a consistent staffing team, and this had been supported by the registered managers also providing care. The management team were committed to providing a consistent and stable staffing team for each person.

Using medicines safely

- People were supported to take their medicines safely. One person told us the medicine they liked to take when they were upset or if things got too much.
- Staff had a good understanding of how people liked to take their medicines and supported their preferences.
- Medication Administration Records (MAR) were completed to show the medicines people received.

Preventing and controlling infection

• People had been supported to understand and improve cleaning and hygiene practices in light of Covid-19.

- Staff supported people with role plays and learning materials to understand the use of face masks.
- Cleaning regimes had been improved to help keep people safe from Covid-19.

• Staff had Personal Protective Equipment (PPE) and kept updated on the current guidance about when to use this.

Learning lessons when things go wrong

- The management team took a detailed approach to learning from incidents and were committed to ensuring improvements were identified and acted on.
- Investigations were completed, and learning was shared with staff to help prevent further incidents.

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 our last inspection we rated this key question good. The rating for this key question has remained the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership vision, values and culture; Acting with honesty and transparency if something goes wrong

- The leadership team recognised that an incident involving staff in the service had impacted on staff morale. The leadership had taken appropriate action and were honest with the team about what had happened and were working with the staff team to ensure similar incidents did not occur.
- The service was meeting the requirements of the duty of candour. The duty of candour is a legal duty for providers to act openly and honestly, and to provide an apology if something goes wrong. There had not been any duty of candour incidents however the registered manager understood the requirements of this.

Managing the quality of the service, meeting legal requirements and staff and managers being clear about their responsibilities

- The provider had comprehensive quality monitoring systems in place which reviewed and identified where improvements were required, for example in people's care plans.
- Auditing systems reviewed incidents and looked for patterns of behaviour. This was helpful to identify trends, or key times when people may need additional support.

Engaging and involving people using the service, the public and staff

- People, staff, relatives and professionals had been asked for their feedback about the service. The feedback was very positive and appreciative of the service.
- The registered managers were accessible and spent time with people in their homes to review staff practice and gain regular feedback.

Working in partnership with others; Continuous learning, innovation and improving the quality of care

• Feather-Stone Care worked well with other agencies and healthcare professionals. One healthcare professional said, "...the company have always been transparent in their approach and when they have required guidance or knowledge have asked our team for advice and training. There have also been learning curves especially at the start of [name of person]'s move to the home but they welcomed teams input in learning from mistakes made."

• The local authority also commented that the service had worked well with them with a focus on learning and making improvements.