

Trident Reach The People Charity Ferndale Crescent

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 27 September 2016. During that inspection we found that although the provider was not breaching any regulations the service required improvement. This was because we had concerns that care records were not up to date, care reviews were not person centred and plans to improve the quality of the service were not reviewed. As a result we undertook a focused inspection to check whether the provider had made those improvements. This report only covers our findings in relation to those topics. You can read the report from our last comprehensive inspection in September 2016, by selecting the 'all reports' link for Ferndale Crescent on our website at www.cqc.org.uk.

This focused inspection took place on 23 May 2017 and was unannounced.

Ferndale Crescent is a residential home which provides support to people who have learning disabilities. The service is registered with the Commission to provide personal care for up to eight people and at the time of our inspection there were six people using the service.

People told us the home was well run. The registered manager had taken action to address the concerns we identified at our last inspection. They were aware of their responsibilities to the Commission and they were knowledgeable of the type of events they were required to notify us of. Staff told us the registered manager and deputy managers were supportive and led the staff team well. Staff had a clear understanding of the provider's philosophy and how to meet people's specific needs. People had the opportunity to influence and develop the service they received. The registered provider and registered manager made checks to ensure the standard of care was maintained and improved upon when possible.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

Good ●

The service is well-led.

People told us the service was well-led.

Members of staff told us the registered manager and deputy managers were supportive and led the staff team well.

The registered manager was aware of their responsibilities to the commission. They promoted an open and transparent culture in line with their required duty of candour.

Ferndale Crescent

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Ferndale Crescent on 23 May 2017. This inspection was undertaken to check that the provider had made necessary improvements after our September 2016 inspection. We inspected the service against one of the five questions we ask about services: is the service well-led? The inspection team consisted of one inspector.

As part of planning the inspection we checked if the provider had sent us any notifications. These contain details of events and incidents the provider is required to notify us about by law, including unexpected deaths and injuries occurring to people receiving care. We also referred to any other information we had about the service. We used this information to plan what areas we were going to focus on during our inspection visit.

During our visit we spoke with three people who lived in the home. We also spoke to the registered manager, a deputy manager and three members of staff. We looked at records including three people's care plans and quality monitoring information to identify if the provider had taken action in response to concerns raised at our last inspection. We spoke by telephone with one person's relative.

Is the service well-led?

Our findings

We found that the provider had taken action to address concerns from our last inspection. All the people we spoke with said they enjoyed living at the home. One person said, "Yes it's fine. I like it here. This is my home." The relative of one person told us, "I am very happy with the service. I think it's excellent." We saw people who use the service appeared happy and they engaged confidently with staff. Staff told us they enjoyed working at the service and felt it was improving.

The registered manager told us that in response to our last inspection they had reviewed how the risks associated with people's specific conditions had been recorded. Staff we spoke with and records confirmed that this information was clearer and easier to find. We observed that staff supported people in line with their care plans. Clear record keeping enabled staff to respond promptly and safely when people required support.

The registered manager had taken action to improve how people were involved in commenting on the care they received. A relative told us, "We have regular meetings and discussions." They said these had resulted in a person receiving the appropriate support to mobilise safely. The registered manager had reviewed how staff recorded key worker meetings with the people they supported. This had encouraged staff to record more personal information about how people wanted and needed to be supported. We noted however that in some instances staff had still recorded tasks and events without reflecting on the impact they had on people's welfare. The registered manager acknowledged this and we saw that they were addressing it with staff at meetings and supervisions. Meetings had been held with people living at the home to discuss aspects of the service which affected everyone's welfare and to take part in assessing and interviewing new staff. People had the opportunity to influence and develop the service they received.

The provider's operations manager and registered manager conducted regular checks of the quality of the care people received. Audits since our last inspection demonstrated they were reflective of current practices and identified how aspects of the service could be improved. Actions were reviewed in order to assess their impact on improving peoples' lives. Recent quality reviews had resulted in improving the variety and frequency of activities for people. Records showed there were also systems to make sure relevant checks had also been made on utilities and equipment in the home so they remained functional and safe.

Members of staff told us the registered manager and deputy managers were supportive and led the staff team well. One member of staff told us, "If I struggle they will support me." Another member of staff told us, "With all the training I get, it's given me the confidence to go to college." They also told us they were encouraged to share what they had learnt at college with other staff members.

Staff described an open culture, where they communicated well with each other and had confidence in their colleagues and in their manager. One member of staff said they had read the provider's whistle-blowing policy, but felt they could confidently approach the registered manager if they had any concerns. They told us, "We are open and talk to each other." Staff told us they were encouraged to speak up and express their views at regular staff meetings and supervisions.

The registered manager was aware of their responsibilities to the commission. They were knowledgeable of promoting an open and transparent culture in line with their required duty of candour. They could describe the type of events they were required to notify us of and their latest inspection ratings were clearly displayed at the service and on the provider's website. People would receive a fair and honest response to their concerns and enquires.