

# Calderdale Metropolitan Borough Council

## Ferney Lee Services for Older People

### Inspection report

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Ferney Lee is a residential care home providing personal care for up to 31 people aged 65 years and over. The service provides permanent places, intermediate care, transitional, emergency and respite care. There were 10 people using the service when we visited. Accommodation is provided over two floors and the intermediate care is provided on a separate unit. The intermediate care provision ends on 30 September 2019.

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

People and relatives were unanimous in their praise of the staff and the consistently high standards of care and support provided. People described staff as 'marvellous' and 'first class'. Staff were exceptionally thoughtful and kind with people, putting people's needs first and frequently going above and beyond their role. Staff consistently treated people with respect and maintained their privacy and dignity.

People received person centred care which was responsive to their needs. Staff understood how to manage any risks to people and knew the processes to follow to manage any allegations of abuse. Care records provided detailed information about people's needs and preferences. People's health care and nutritional needs were well managed and they received their medicines when they needed them.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

There were enough staff to meet people's needs without rushing. Recruitment processes ensured staff were suitable to work in the care service. Staff were trained and had the required skills to meet people's needs. Staff told us they loved their jobs and felt well supported.

The service was well run. Everyone spoke highly of the registered manager and the improvements they had made, working alongside the staff supporting them and making sure the quality of care was maintained.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was Good (published 23 February 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Ferney Lee Services for Older People

## **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

An inspector and an Expert by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Ferney Lee is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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.

#### 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 commissioning and safeguarding teams. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and two relatives about their experience of the care provided. We spoke with ten members of staff including the registered manager, operations manager, team leader, care workers, the catering staff and a domestic.

We reviewed a range of records. This included two people's care records and medication records. We looked at two 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.

# 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. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe at the service. One person said, "I've nothing to worry about here. I know I'm safe." Relatives were similarly assured. One relative said, "[Family member's] totally safe and I can relax knowing [they are] well looked after."
- Staff had completed safeguarding training and understood how to recognise and report abuse.
- Systems were in place to record and monitor any incidents and appropriate referrals had been made to the local authority safeguarding team. Concerns and allegations were acted on to make sure people were protected from harm.
- Actions were taken to keep people safe and any lessons learned were shared with staff to help prevent recurrences.

### Staffing and recruitment

- There were enough staff to meet people's needs and keep them safe. People told us staff were available and came quickly if they needed any help.
- Staff worked as a team, communicating effectively with each other to make sure everyone received timely support. Staff ensured they maintained a presence in communal areas and also met the needs of people who chose to stay in their rooms.
- Staff were happy with the staffing arrangements. One staff member said, "There's plenty of us [staff] and it means we don't have to rush people and can spend time with them. We all get on and work together as a team. It's lovely."
- Staff were recruited safely with all required checks completed before they started in post, including criminal record checks with the Disclosure and Barring Service (DBS) and references.

### Assessing risk, safety monitoring and management

- Risks to people were identified, assessed and recorded with clear guidance for staff on how to manage and minimise the risks. Staff understood and followed risk management plans.
- Equipment and the environment was safe and well maintained.
- Staff had received fire safety training and taken part in fire drills so they knew how to respond in the event of a fire. Evacuation plans were in place to ensure people received the support they needed in an emergency situation.
- Accidents and incidents were recorded. Where these had occurred, there was evidence of investigation and follow up action.

### Using medicines safely

- Medicines were ordered, stored, administered and disposed of safely.
- People said they received their medicines when they needed them, which was confirmed in the medicine records we reviewed.
- Staff followed safe practices, supporting people to take their medicines and making sure they had done so before signing the medicine administration record.
- Staff had completed training in medicines administration.

#### Preventing and controlling infection

- The home was clean and effective infection control systems were in place.
- People and relatives told us cleaning standards were good. One person said, "It's absolutely spotless."
- Staff had received infection control training and followed safe practices; washing hands and wearing gloves and aprons appropriately

# 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. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they moved into the service and this information was used to develop care plans and risk assessments so staff understood how people's care was to be delivered.
- People's needs were continually reviewed to ensure the care they received met their choices and preferences.

Staff support: induction, training, skills and experience

- People were supported by staff who were well trained and had the necessary skills and competencies to meet people's needs.
- New staff completed an induction and shadowed more experienced staff before working unsupervised.
- Staff received ongoing training which was monitored by the registered manager and kept up to date. Specialist training was arranged to meet any specific needs.
- Staff were unanimous in their praise of the registered manager who they said encouraged and supported them with their training and development. Some staff told us they had struggled with elearning but were now confident in accessing this training due to the help they had received from the registered manager. One staff member had recently taken on a more senior role. They said, "{Registered manager} has been fantastic. I didn't know if I could do this role, but she supported me and had confidence in me and I'm loving it."
- Staff received regular supervision.

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

- People's nutritional needs and preferences were met. People told us they enjoyed the food.
- The catering staff had worked at the service for many years and knew people's dietary requirements and preferences. There were two choices of meals on the menu which was displayed in the dining room. However, there was a very person-centred approach to meals with the cook making several different dishes to meet people's requests.
- Drinks and snacks were offered throughout the day and available to people if required during the night.
- People's weight was monitored for changes with action plans in place to address any weight loss.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked in partnership with healthcare professionals, including those providing intermediate care to people. Any specialist support people required was accessed promptly.
- Care records showed a wide range of health and social care professionals were involved in people's care

and any advice given was acted upon.

#### Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were supported to have choice and control of their lives as staff understood and applied the key principles of the MCA.
- One person had a DoLS authorisation in place and the condition on the authorisation was met.
- People were involved in decisions relating to their care and we saw evidence they had consented to their care and support where they had the capacity to do so.
- People's capacity to make particular decisions had been assessed, for example in relation to care and treatment, and best interest decisions had been recorded.

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

- The service was comfortably decorated and furnished providing a pleasant environment for people.
- People's names and photographs were on bedroom doors and signs indicated bathrooms and toilets. Noticeboards provided useful information for people such as activities, advocacy, hairdressing costs. Corridors were lined with pictures and photographs.
- There were different communal areas where people could sit together in small groups and items to interest and occupy them. For example, photographs, pictures, books, games, music, and a fish tank.

## Is the service caring?

### Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has now improved to Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- There was an exceptionally strong and visible person-centred culture, with staff going out of their way to ensure people were treated equally and fairly.
- Prior to the inspection we were contacted by several relatives who gave extremely positive feedback about the service. Comments included; "We cannot praise the service highly enough. We visit unannounced and have always found [family member] to be in excellent condition, clean, well groomed and obviously extremely well cared for by a highly professional and caring staff. Ferney Lee sets a standard that other care homes should aim to achieve" and "We had to find respite care for [family member] at short notice, which was difficult as we live [in a different part of the country]. Once I spoke to [registered manager] she helped put my mind at rest. [Family member] was naturally very nervous, but we were invited to Sunday lunch the day before she moved in, and from the start [family member] was quite relaxed. When it was time to take her home again, [family member] said, "You couldn't have found anywhere better for me. I felt safe and looked after." The social side to [family member's] stay at Ferney Lee brought out a side of her that we hadn't seen for so long."
- People and relatives were unanimous in their praise of the staff and the consistently high standards of care and support provided. One person said, "You couldn't get better than this anywhere. This place is brilliant and the staff are fantastic. I call it the Todmorden Hilton." Another person told us, "It's wonderful. It's like being in a five star hotel with love."
- One relative told us, "It's over and above anything we expected. All the staff are just wonderful, nothing's too much trouble and they really care. You feel this as soon as you walk in. This is the best home I have ever visited. The standard of care and friendliness is second to none!"
- We saw all staff were exceptionally thoughtful and kind with people, often these were small gestures but clearly meant a lot to each person. We saw one person gained comfort from cuddling a soft toy and enjoyed sharing cuddles with staff. The person was laughing and smiling as they hugged staff and looked very relaxed. Staff knew the person liked birds and sat them where they could see and hear the pet budgie and look out of the window into the garden.
- We saw staff continually praised and complimented people which had a very positive effect on their wellbeing. One person was struggling to walk with staff and kept saying, "I can't do this." Staff told the person to take their time, told them how well they were doing and encouraged them. They chatted to the person saying they'd heard they had a good singing voice and asking them to give them a tune. The person started singing and staff and other people joined in. Before long the person had reached their chair and was smiling saying, "I got there, in the end."
- We saw kitchen staff came into the dining room to greet people as they came in for breakfast, always

finding a way to compliment each person and then sitting with them to ask if they'd like a drink first before deciding what they'd like to eat. We heard one person say, "Oh, that would be nice [to have a drink first]. That's what I do at home."

- Staff put people's needs first and often went above and beyond to enrich people's lives. One person had a great interest in trains. A staff member found out the Flying Scotsman was coming to the National Railway Museum in York and made arrangements to take the person. The staff member did this on their day off work. The person told us, "I loved it. I'd waited over 50 years to see it and be on that footplate." Another person recognised themselves in an old photograph in a book about the local area. Staff told us they arranged for the photograph to be enlarged and framed so the person had their own copy which they were delighted with.
- Staff respected and promoted people's individuality and diversity. We saw staff supported and enabled individuals to express their sexuality and upheld each person's right to live their life in the way they chose. This included how people wanted to dress, the name they wanted to be called and who they wanted to socialise and spend time with. This was clearly documented in people's care plans.
- One person had specific dietary needs and the person's relative told us the kitchen staff had bought in food and drink specifically for them. The relative said, "It's the thought they put into it. They don't just buy in things, they think about what [person] can have and then cook and bake things [person] loves."

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives were fully involved in all decisions about their care and support. People told us staff always consulted them and made sure things were done the way they wanted. Comments included, "They don't do anything without checking with me first and making sure I'm okay with it"; "I can't fault it. Nothing is too much trouble and always done with a smile" and "Care is great. If you want anything, then they are there. They can't do enough for you."
- Staff were particularly skilled in understanding people who were unable to communicate their needs verbally. Staff were attuned to people's feelings and understood and responded to the small signs or gestures individuals made.

Respecting and promoting people's privacy, dignity and independence

- People told us staff consistently treated them with respect and maintained their privacy and dignity. One person said, "Oh yes, they're all very good like that. We have a laugh together but they're always respectful."
- We saw staff knocked on people's doors and asked if they could come in before entering. Staff were discreet when asking people if they needed any support with personal care and this was always carried out in private.
- Staff promoted and embraced a culture of respect in everything they did. This was evident in our discussions with staff and summed up by one staff member who said, "I've worked in care for 14 years and this is the best place I have ever worked. The care provided to people is brilliant and so person-centred. We all respect one another. I never forget that I work for the people who live here, the Council may pay my wages, but it's the people I'm here for and whatever they want I will do my best to provide."
- Staff consistently encouraged and supported people to be as independent as possible. One person told us staff were very good at getting them to do things for themselves but were always nearby to support them if they needed help.
- Feedback from a family whose relative had received intermediate care following a long stay in hospital praised the support given by staff which had enabled the person to return home. They said, "When [person] arrived [they] could barely walk and was very frail, within seven days [person] was walking with a frame and after two weeks was showering [themselves] with help. When [person] was discharged [back to their own home], [they] were 90% back to baseline...if you had seen [person] on admission to Ferney Lee you would have thought [person] would never get back to anywhere near [their] baseline."

- A social worker who has worked with the service since September 2018 said, "I have only ever received positive feedback from people who use the service and their families. Care staff constantly go above and beyond in their role and ensure people who are using the service are happy...each person is treated as an individual with a high standard of person-centred care. Ferney Lee is not like a 'care home', it is a home and feels like one."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person-centred care from staff who knew them well and were responsive to their needs.
- Care plans provided detailed information about people's needs and preferences and the support they required from staff.
- Staff had a good understanding of people's needs and were kept informed of any changes to people's care and support through handovers at each shift change.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's preferred method of communication was recorded and known by staff.
- The registered manager told us information could be provided in alternative formats such as other languages, braille or spoken format, if required.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to keep in contact with family and friends. Relatives said they were always made welcome when they visited.
- People told us they enjoyed the activities provided. One person said, "There are craft classes and always something going on. I like to read and do crossword puzzles". Another person said they liked watching television and talking and also enjoyed the exercise classes. A further person told us about a recent outing and said, "We had a trip to Hollingworth Lake and had a meal out, it was so nice. We had a little walk, but it was cut short by the weather."
- Volunteers from a local community project visited and spent time with people and a local library group was helping people develop life story books. There were also regular visitors from the local church.

Improving care quality in response to complaints or concerns

- Systems were in place to manage complaints. The complaints procedure was displayed in the service.
- People told us if they had any concerns they felt able to speak with any of the staff and were confident issues would be dealt with. One person said, "I'd just tell them, talk to them. They are good listeners."

End of life care and support

- People's end of life wishes and preferences were discussed and recorded.
- One person talked to us about what they wanted to happen at the end of their life including the hymns they wanted at their funeral and particular personal items they wanted to be in their coffin with them. Staff were fully aware of the person's wishes and this was clearly detailed in their care plan including photographs of the personal items.

## 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. At this inspection 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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service was well run and organised with strong and supportive leadership.
- Everyone spoke highly of the registered manager and the improvements she had made since starting in post. One relative said, "All the staff are wonderful but it all comes from [registered manager]. I can't praise her enough."
- The registered manager was actively involved in people's care and worked alongside staff providing support and guidance to ensure good standards of care were maintained.
- Lines of accountability were clear. Staff understood their roles and responsibilities and said they felt well supported. One staff member said, "[Registered manager] is one of us. She listens to us and makes us feel valued. We're like a family here we all look after each other."
- Staff said they loved their jobs and would have no hesitation in recommending the service to people.
- Effective systems were in place to monitor and assess the quality of the service including monthly audits. This included looking at lessons learned and making sure any issues identified were actioned.

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 understood the requirements of the regulations to make notifications and complied with duty of candour responsibilities when things had gone wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, relatives and staff were involved in discussions about the running of the service. Regular residents and relative meetings were held.
- Staff told us regular supervision and staff meetings gave them opportunities to put forward ideas and suggestions which were listened to and discussed.
- The service worked closely with other health and social care professionals to ensure people received consistent and timely care.