

Ferncross Care LTD

# Ferncross Residential Home

## Inspection report

4 Crossdale Avenue  
Heysham  
Morecambe  
LA3 1PE

Tel: 01524855782

Date of inspection visit:  
17 March 2022

Date of publication:  
23 May 2022

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Ferncross Residential Care Home is a care home providing accommodation and personal care to up to 14 people in one adapted building. The home provides support to older people and older people who are living with dementia. At the time of our inspection there were 14 people using the service.

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

People were protected from abuse and risks to their safety had been identified and managed. There were enough staff to support people. The registered manager carried out checks on new staff to ensure they were suitable to work in the home. People received the support they needed to take their medicines. We were not fully assured that all staff were consistently using Personal Protective Equipment, (PPE), effectively and safely. The registered manager took immediate action to ensure proper use of PPE. The registered manager learnt lessons from incidents and took action to improve the service.

Staff were trained and skilled to provide people's care. Staff provided the support people needed to eat and drink and to maintain a balanced diet. The registered manager and staff worked with appropriate services to ensure people received the healthcare support they needed. The registered manager understood their responsibilities under The Mental Capacity Act 2005 and people's rights were protected. 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.

People were treated people in a kind and caring way by staff. Staff gave people choices about their care and support and respected the decisions people made. People's privacy, dignity and independence were promoted.

Staff provided people with person-centred care that met their needs and took account of their wishes. Visitors were made welcome in the home and people were supported to maintain relationships which were important to them. The provider had a procedure for receiving and managing complaints about the service. The registered manager had links with local and specialist services to ensure people received appropriate care as they reached the end of life.

The provider had developed a person-centred culture which focused on providing good care for people. They had identified areas of the service which required improvement and had developed a plan to address the issues identified. The registered manager and staff worked with other services to ensure people consistently received care that met their needs. The registered manager lacked knowledge about some areas of legislation and associated legal requirements. We have made a recommendation about improving their knowledge of legislation associated with providing the service.

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.

This service was registered with us on 25 February 2021 and this is the first inspection.

The service was previously carried on by a different provider. The last rating for the service under the previous provider was good, (published on 30 December 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Lancashire and South Cumbria. To understand the experience of social care providers and people who use social care services, we asked a range of questions in relation to accessing urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

# Ferncross Residential Home

## 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 Health and Social Care Act 2008.

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

The inspection was carried out by one inspector.

#### Service and service type

Ferncross Residential Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Ferncross Residential Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 17 March 2022 and ended on 6 April 2022. We visited the service on 17 March

2022. After our visit we contacted relatives of people and staff by telephone to gather their views of the service.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority and professionals who work with the service. Due to technical problems, the provider was not able to complete a Provider Information Return (PIR). A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

People who lived in the home were living with dementia and were not easily able to share their views with us. We spoke with two people who lived in the home and observed how staff interacted with people. We also spoke with the registered manager, who was also the provider's nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with two members of the care team. We looked around the accommodation.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at four staff files in relation to recruitment and training. We also reviewed records relating to the management of the service. We contacted four people's relatives and two staff to gather their views.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. Staff understood how to identify and report abuse and how to provide people's care safely.
- People and their relatives told us they were confident staff ensured people were safe. One relative told us, "I am happy [relative] is safe".
- Staff said they would raise any concerns about a person's safety with the registered manager. They said they were confident the registered manager would take action in response to concerns raised.

Assessing risk, safety monitoring and management

- The registered manager had assessed and managed risks to people's safety. People's care records included guidance for staff about how to support them in a safe way.
- The registered manager reviewed risk assessments if people's needs changed. This meant staff had accurate and up to date guidance about how to maintain people's safety.

Staffing and recruitment

- There were enough staff to support people. The home was experiencing an outbreak of COVID-19 at the time of our inspection. The registered manager had contingency plans which ensured there were enough staff to support people when some staff members had to self-isolate.
- The registered manager carried out checks on new staff to ensure they were suitable to work in the home. These included confirming applicants' good character and checks against records held by the Disclosure and Barring Service, (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager was open to advice about how to further improve their recruitment processes and records.

Using medicines safely

- Staff supported people to take their medicines. Medicines were stored securely to prevent their misuse.
- Staff were trained in how to support people with their medicines.
- The registered manager had audited medication administration records. They had identified areas around record keeping which needed to be improved. The registered manager was working with staff to support them to maintain full and accurate records of all support given with people's medicines.

Preventing and controlling infection

- Although staff had been trained in the use of PPE, we saw one occasion when staff did not follow best practice in using PPE to reduce the risk of transmission of infection. We raised this with the registered manager who promptly addressed the issue.
- 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 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.

#### Visiting in care homes

The registered manager was following government guidance regarding visits in and out of the home. Relatives told us they could visit when they wished and said staff made them welcome.

#### Learning lessons when things go wrong

- The registered manager was open to guidance and feedback to learn lessons to improve the service. They acted promptly in response to incidents and shared lessons learnt with the staff team to ensure the safety of the service.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- The registered manager had assessed people's needs and gathered information about their preferences about their care and lives. One relative told us, "I was asked about [relative's] care needs and what they like when they moved in."
- The registered manager had used the assessments to develop individual care plans to guide staff on how to support people. They had identified care plans could be developed further to include additional information for staff.
- Staff knew people well and provided support to meet their needs and take account of their wishes. They told us if they were unsure of how to support a person they could ask a senior staff member for advice.

Staff support: induction, training, skills and experience

- Staff were trained and skilled to provide people's care. One person told us, "The staff are very good."
- Staff told us they had completed training to give them the skills and knowledge to provide people's support. They said they felt very well supported by the management team in the home.
- The new provider had taken over the home in the middle of the COVID-19 pandemic. Although staff had completed training, some training updates were overdue due to issues caused by the pandemic. The registered manager had developed an action plan to address this.

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

- Staff provided the support people needed to eat and drink and to maintain a balanced diet.
- The home employed a cook who prepared fresh, homemade meals which people enjoyed.
- Staff discreetly observed people and noticed if they were not enjoying or eating the meals provided. They offered people a range of alternatives and encouraged people to eat and drink enough to maintain good health.

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

- The registered manager and staff worked with appropriate services to ensure people received the support they needed. They identified if people required medical assistance and contacted appropriate local and specialist services.
- People were supported to access healthcare as they needed. Their care records included details of the healthcare services which supported them.

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

- The home was an older property and some areas needed updating. The new provider had developed a plan for improvements to the premises and was in the process of making these changes. Some planned improvements had been delayed due to the impact of the pandemic.
- The accommodation was domestic in style with a range of communal areas people could share. People had personalised their rooms as they wished.

#### 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People made decisions about their care and their rights were protected. The registered manager understood their responsibilities under the MCA. Staff asked people what support they wanted and respected the decisions people made.
- Staff were responsive to people's needs. They followed strategies to ensure people received essential care to maintain their wellbeing. This included finding creative ways to support people to accept support, taking account of their needs and wishes.
- The registered manager ensured any restrictions on a person's liberty were appropriately authorised and the least restrictive option for maintaining their safety.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff treated people in a kind and caring way. They engaged people in conversation and people enjoyed spending time with the staff.
- Relatives told us the staff were very caring to people. One relative told us, "The staff are very caring, they are wonderful." Another relative said, "All of the staff are very caring."

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

- Staff gave people choices about their care and support and respected the decisions people made. They were patient with people and gave them the time and support they needed to express their views and wishes.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and promoted their dignity and independence. They spoke to and about people in a respectful way. They were responsive to people's wishes and ensured all personal care was carried out in private.
- Staff supported people to do as much as they could for themselves to promote their independence.

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Staff provided people with person-centred care that met their needs and took account of their wishes. They knew people well and knew the things that were important to them. A relative told us, "Staff know [relative] well, they know the 'little things' that are important to [relative]."
- Each person had a care plan to guide staff on how to provide their care. The registered manager had included people, and those who knew them well, in planning their support. One relative told us, "[Registered manager] asked us what [relative] likes".

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager assessed people's communication needs to identify how they needed information to be provided.
- Staff were aware of people's communication needs and how to share information with them.

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

- Relatives told us they were made welcome in the home and could visit when they wished. The registered manager had followed government guidance about supporting visiting in and out of the home during the COVID-19 pandemic. People were supported to maintain relationships which were important to them.
- The registered manager gathered information about people's interests and supported people to take part in activities they enjoyed. People enjoyed laughing and chatting with staff. Staff understood the importance of taking time to engage with people as they provided their care and support.

Improving care quality in response to complaints or concerns

- The provider had a procedure for receiving and managing complaints about the service. There had been no formal complaints since the new provider was registered. The registered manager told us any complaints would be investigated thoroughly and action taken to improve the service in response to concerns raised.
- Most people told us the registered manager and staff acted in response to any concerns they raised. One person said, "If I have any concerns I speak to [registered manager] and they sort it out".

#### End of life care and support

- People were supported to remain comfortable and pain free as they reached the end of life. The registered manager had links with local and specialist services which would work with staff in the home to care for people at the end of their lives.

# 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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant there were shortfalls in service management. Although there was a culture of providing person-centred care, regulatory requirements were not fully understood.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 lacked knowledge around some areas of legislation and associated regulatory requirements. Although we found no impact on the care provided, this placed them at risk of breaching regulations due to a lack of understanding.

We recommend the registered manager acquaints themselves more fully with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and The Care Quality Commission (Registration) Regulations 2009.

- The provider, registered manager and staff were committed to providing people with good quality care. The registered manager had identified areas of the service which required improvement and had developed a plan to address the issues identified. They had given priority to ensuring the quality and safety of the service. Some actions to make improvements had been delayed due to the impact of the COVID-19 pandemic.
- Staff told us they felt well supported by the management team in the home. One staff member told us, "[Management team] are really supportive, they make us feel valued."
- The registered manager and staff were open and honest with people and their families when incidents occurred.

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

- The provider had developed a person-centred culture which focused on providing good care for people.
- Staff had a good understanding of the principles of person-centred care. They had developed close and caring relationships with people. Everyone told us staff provided caring, person-centred care to people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- This was a small service and the registered manager worked with staff providing people's care. They used informal systems to gather people's views as they supported them. People's relatives knew the management team in the home. One relative told us, "[Registered manager] gave me his phone number and told me to call him if I have any questions or concerns."

- The provider was committed to the continuous improvement of the service. They had made improvements to the service and developed an action plan to address areas where further improvements were required.
- Staff told us they were included in identifying areas where the service could be improved. They said the registered manager listened to their suggestions and they were included in making improvements to the service.

#### Working in partnership with others

- The registered manager and staff worked with other services to ensure people consistently received care that met their needs. They knew the other services which supported people and worked cooperatively with them. The registered manager contacted partner agencies if they identified people needed support from other services.