

Young People Services Birmingham Ltd

Fern House

Inspection report

320 Moseley Road
Birmingham
West Midlands
B12 0BS

Tel: 01214401032

Date of inspection visit:
21 February 2019

Date of publication:
08 March 2019

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?	Good ●

Summary of findings

Overall summary

About the service: Fern House provides accommodation for people who require personal care with a learning disability. The service can accommodate up to six people.

The care service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. The values of choice, promotion, independence and inclusion, which the guidance promotes were being provided for people who used the service at Fern House. This meant the people they supported with learning disabilities and autism were not able to live as ordinary a life as any citizen.

On the day of our inspection five people were using the service; one person was accessing the service for short term respite.

People's experience of using this service:

People were supported by sufficient numbers of staff who had been subject to appropriate pre-employment checks. Staff knew people well and provided care in a way that maintained people's safety. People's care was tailored according to their individual needs, interests and preferences.

Staff were well supported in their roles and the provider ensured that staff had access to a range of training that was relevant to their role. People's needs were assessed prior to moving into the home to ensure that they could be met within the service. Staff worked in partnership with a range of healthcare professionals to provide the best outcomes possible for people.

People had choice and control over how they spent their time. The principles of the Mental Capacity Act were followed and understood by staff. The home was well maintained and adapted to meet the needs of the people living at Fern House.

People were treated with respect and their dignity was maintained by staff. People were supported to pursue their interests and hobbies.

There was an effective system of audits that were working successfully to monitor and improve the quality of care people received. The registered manager and provider were visible throughout the home and committed to continually improving the care provided at Fern House.

Rating at last inspection: At the last inspection in April 2016 we rated the location as Good.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to

monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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?

Good ●

The service was well-led

Details are in our Well-Led findings below.

Fern House

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Fern House is a care home. People in care homes receive accommodation and nursing or personal care. 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:

The inspection was completed on 21 February 2019 and was unannounced.

What we did:

Prior to the inspection visit we gathered information from a number of sources. We also looked at the information received about the service from notifications sent to the Care Quality Commission by the registered manager. We asked the provider to complete a provider information return [PIR]. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We spoke with three people who used the service. We spent time observing staff interacting with people. We spoke with two staff including the registered manager. We looked at documentation relating to two people who used the service, two staff files and information relating to the management of the service.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff were knowledgeable about the action that they should take if they felt people were at risk. The provider had a safeguarding policy in place and staff understood the importance of following safeguarding adult procedures. Staff knew how to recognise and report abuse and were aware of the correct procedures to follow.
- People told us they felt safe and were confident that staff would take action if they had any concerns. One person told us, "The staff listen to me and I always feel safe here."

Assessing risk, safety monitoring and management

- People's risks were assessed and detailed guidance was in place to support staff in reducing people's known risks.
- A number of people living in the home displayed behaviours that may challenge services. The provider had worked effectively with other professionals involved in people's care to develop positive behavioural support plans. This helped ensure that staff supported people in a way that maintained their safety.
- We observed staff were aware of the triggers that caused people to become unsettled and minimised these successfully on a day to day basis in the home.

Staffing and recruitment

- Appropriate recruitment checks were conducted prior to staff starting work, to ensure they were suitable to work with vulnerable people.
- There were enough staff on duty to support the needs of people and keep them safe. The provider was in the process of working with the people responsible for commissioning people's care to increase the staffing levels in the home.

Using medicines safely

- People could be assured that their prescribed medicines were managed safely.
- People were encouraged to be as independent as possible in the management of their medicines. We observed that one person was able to administer their own medicines with supervision from staff and that they were developing increasing independence in this area.
- Clear detailed protocols were in place that guided staff on what to look for and when to administer 'as required' medicines.
- Staff completed Medicine Administration Records (MARs) to show when medicines had been administered and used body maps to illustrate where they had administered topical creams and patches. Records were audited regularly by the registered manager and were completed accurately.

Preventing and controlling infection

- The home was well maintained, clean and protected people from the risk of infection.
- The service had systems in place to manage the control and prevention of infection.

Learning lessons when things go wrong

- The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
- Risk assessments and care plans were reviewed following incidents to prevent re-occurrence.
- An additional lounge had been created on the ground floor of the property because the registered manager had identified a trend of incidents when people spent time together in communal areas. This strategy had successfully reduced the number of incidents between people in the home.

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

Good: 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 home. This was to ensure that staff could meet people's assessed care needs and that the people living in the home were compatible.
- Assessments considered all aspects of people's needs and ensured that people received support that met their needs in a holistic manner; considering their cultural, spiritual and emotional needs as well as their direct care needs. Staff provided care in line with people's needs and preferences.

Staff support: induction, training, skills and experience

- Staff were supported to access ongoing training and development that supported them in their role.
- The provider told us "Training is very important. If there is any training people need I make it a priority to support them to access it. The staff are on training today because we identified they would benefit from it when working with people who may display behaviours that challenge services."

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

- People's care files contained information about their food likes, dislikes and any foods which should be avoided.
- Staff encouraged people to maintain a healthy lifestyle and ensured people had access to a balanced and nutritious diet.
- People were offered a choice of meals and people told us the food was good. We observed the lunch time meal. People were given choices and all enjoyed the meal. One person said, "The food here is nice. I enjoyed my lunch."

Staff working with other agencies to provide consistent, effective, timely care

- The provider maintained close links with the other professionals involved in people's care.
- Staff maintained accurate records to support other professional in completing assessments and contributing to the coordination of people's care.

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

- The home had been adapted to meet the needs of the people living there.
- The provider was in the process of renovating the bathrooms on the ground floor of the home to provide an accessible bath for one person who had recently moved into the service.
- One person took pride in showing us their bedroom and told us "I keep my room clean. It is nice; I got to choose how it was decorated too."

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare services in a timely manner when they needed to.
- Staff were committed to working in partnership with healthcare professional to improve people's wellbeing.

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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- The registered manager and staff were aware of their responsibilities in respect of consent and involved people as much as possible in day-to-day decisions. Staff were also aware that where people lacked capacity to make a specific decision then best interests would be considered.

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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- Staff treated people with respect and it was clear staff knew people well and used their knowledge of people's interest and personal background to tailor the care they received.
- Staff considered people's cultural needs and supported people to explore and attend culturally specific events when they wished to.

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

- People's diverse needs were recorded and staff we spoke with demonstrated a good knowledge of people's personalities, individual needs and what was important to them.
- People were empowered to make decisions about their care, how they spent their time and what happened in the home.
- Regular "service user meetings" were held to discuss activities, developments in the home, to plans holidays and menus. People were also able to influence the development of the service through these meetings.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy, treated people with dignity and respect and encouraged people to be as independent as possible.
- People had a key to their room and we observed staff knocking and asking for permission before entering people's bedrooms.

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Staff were knowledgeable about people's preferences and could explain how they supported people in line with this information.
- People were empowered to make choices about their care, how they spent their time and were supported to work towards achieving their aspirations.
- One person had recently chosen not to return to college. The registered manager had supported the person to try and find a volunteering placement at a local charity shop. When this was not possible they had arranged a work placement in another of the providers homes. This resulted in the person working towards greater independence by attending a structured work environment and contributed towards an enhanced sense of well-being.
- People were supported to pursue their interests. For example, people had been supported to go camping and partake in bike rides. The provider was in the process of purchasing a caravan so people could have regular holidays in response to people's feedback.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. People who used the service told us they would feel able to raise any concerns with staff.
- Although no complaints had been received the provider and registered manager had put systems in place to make sure any concerns or complaints were brought to their attention. This was because they were committed to listening to people and improve the quality of the service.

End of life care and support

- We reviewed systems for end of life care for people supported by the service. Although none of the people supported required end of life care, we were informed the service would work alongside the person, their relatives and other health professionals to coordinate end of life care.

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

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

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The provider was visible in the service and accessible to people living in the home. The provider knew people well and was a visible role model for staff. They were committed to focusing on the needs of people and providing high quality person centred care and support.
- The provider was present in the home on a day to day basis and provided ongoing observational feedback to staff on their practice.
- There were also formal governance systems that were working effectively to monitor and improve the quality of care people received.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had an effective system of audits that provided oversight in key areas of the running of the home. These audits had worked successfully in identifying areas that required strengthening. For example, the registered manager was in the process of developing new MAR charts as they had identified aspects of the current charts that were being used that could be improved.
- The registered manager understood their responsibilities of being registered with the Commission. They had systems in place to ensure that statutory notifications were submitted to us.
- The registered manager was committed to the ongoing development of the service was open to feedback and ideas that could improve the quality of care people received.

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

- The registered manager gathered feedback from people through resident meetings and talking to relatives. This information was used to develop the service and improve the quality of care people received. Feedback from people had been acted upon. For example, people had been supported to go camping and menus had been adapted to accommodate people's requests.

Working in partnership with others

- The registered manager and the provider told us the service had relationships in place with health professionals and sought their advice as needed. We saw there was regular input from a range of different professionals in people's care to support them to remain safe and healthy.