

Aspire Care (UK) Limited

Fawnhope Rest Home

Inspection report

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Ratings

Overall rating for this service	Requires Improvement
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

About the service

Fawnhope Rest Home is a residential care home registered to provide care and support for up to 19 people. The service provides support to older people some of whom were living with dementia. The home is accessed over two floors by stairs and a stairlift. Accommodation was in an adapted building with a separate annexe. At the time of our inspection there were 7 people living at the home.

People's experience of using this service and what we found Improvements had been made in the home since our last inspection. People had risk assessments in place for their care and support needs. The provider and registered manager had introduced a system to ensure these were kept up to date.

People told us they were happy and safe living at the home, supported to live well by staff who had the necessary information to keep them safe. A person stated, "The care staff here take care of me." Another person told us, "I feel safe, I look after a lot of people and they look after me, I'm happiest in here." A visiting health and social care professional commented, "[Person's name] was able to report they felt safe at the home, was happy and was well fed."

Assessments were completed and included risk of falls, support needed in a fire evacuation and specific risks from individual health conditions such as pain assessments. Physiotherapy guidance for contractures was in place. This is a tightening of the muscles, tendons, skin, and surrounding tissues that causes the joints to shorten and stiffen.

Repairs and cleanliness concerns identified at the previous inspection had been completed with further improvement works in progress. A staff member stated, "The repairs have been done, we are able to tell the nominated individual what we need, and they sort it."

Infection control procedures were in place and continued to help keep people safe. There were enough stocks of personal protective equipment (PPE) and staff were wearing it in line with the current government guidance.

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.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 16 January 2023). At this inspection we found improvements had been made and the provider was no longer in breach of Regulation 12.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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.

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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated



Fawnhope Rest 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.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 2 inspectors.

Service and service type

Fawnhope Rest 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. Fawnhope Rest 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the

quality and safety of the care provided and compliance with regulations.

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

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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service about their experience of the care provided. We spoke with 11 members of staff including the registered manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received feedback from 4 health and social professionals and 1 relative of a person living in the home.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We made general observations of interactions between staff and people. We reviewed a range of records. This included 3 people's care records focusing on the assessment of risk. We met with the nominated individual and registered manager to discuss plans for sustainability of improvements made.

Inspected but not rated

Our findings

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

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the Warning Notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 12.

- People had individual risk assessments in place for all aspects of their care and support. This meant that staff were guided to take the necessary steps to mitigate risks for the person.
- The provider and registered manager had devised a system for review. This meant that risks were reviewed in addition to being updated as things changed, for example wardrobes had been secured to the wall, sinks repaired, and radiator covers replaced. These were checked weekly as part of a health and safety walkaround by delegated staff member.
- Risks associated with the property and environment were well managed. Checks for fire safety, gas safety and electricity had been completed. We observed corridors to be free of clutter and the communal areas to be tidy and free of hazards.
- Systems and processes were in place to ensure fire safety within the home. People had personal emergency evacuation plans in place.
- People told us they felt their risks were managed well and felt safe living in the home. A visiting health and social care professional told us, "Significant improvements had been made in the daily records to reflect personal care being provided."

Preventing and controlling infection

At our last inspection the provider had failed to effectively assess and control the spread of infection. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The provider had made improvements of the layout and hygiene practices of the premises. Repair and redecoration works had been completed. The home was odour free and improvements such as tiling in bathrooms and replacing of worn equipment had been completed since our last inspection.
- We were assured that the provider was using PPE effectively and safely, in line with current best practice guidance.
- We were assured that the provider's infection prevention and control policy was up to date.
- Visiting to the home was encouraged by staff. A relative told us, "[Name] is happy here. It is a little family home, I can visit day or night."

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to protect people from the risk of abuse. Staff had received training and understood how to report safeguarding concerns. Staff knew how to recognise the signs and symptoms of abuse and who they would report concerns to both internally and externally.
- Staff have access to up to date policy and procedures. A staff member commented, "I haven't had to raise a safeguarding here. If I had I can talk to the registered manager or we have a safeguarding folder that talks us through everything we need to do. All the information is in the folder, it's all very clear."