

Fortis Care Limited

Fortis Care Hertfordshire

Inspection report

Fortis Care, Caxton Point
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Tel: 01438487270

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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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Fortis Care Hertfordshire is a supported living service and a domiciliary care service. The service provides personal care for people living with a learning disability and/or autism in their own flats. At the time of our inspection there were six people using the service who received the regulated activity of personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

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

The registered manager and the provider promoted care and support focused on people's strengths and this promoted their independence. People were encouraged to take positive risks and take part in activities and pursue their interests.

Right Care

Staff showed kindness and compassion when supporting people. People trusted and approached staff with confidence. Staff supported people how they wanted and helped them stay safe and enjoy their lives.

Staff received training and support to understand each person's needs and their support had a positive impact on people's lives. People were actively involved in their care. Key workers were allocated to each person to help ensure people had regular input and were involved in evaluating their progress, goals and achievements.

Right Culture

The registered manager and provider promoted a positive, caring and inclusive culture amongst the staff team. Staff morale was good, staff felt listened to and empowered to support people in a personalised and safe way.

The registered manager and provider used a range of audits and governance systems which were effective to quality assure the service provided and identified where improvements were needed. A service improvement plan had been developed to show what actions had been taken and if these were effective to drive forward improvements in the service.

Staff received training and understood best practice when supporting people with a learning disability and/or autism. People and their representatives were involved in their care and their views and choices were respected. Staff felt valued and were involved in developing the service to improve people's outcomes.

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

Rating at last inspection

The last rating for this service was good. (Published 20/06/2019)

Why we inspected

The inspection was prompted in part due to concerns received about the management of the service, safety management, staffing and social interaction. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe, Effective, Responsive and Well-led sections of this full report.

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?

Good ●

The service was well-led.

Details are in our well-led findings below.

Fortis Care Hertfordshire

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.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

This service provides care and support to people living in 'supported living' settings, so they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support. This service also operates a domiciliary care agency to provide personal care to people living in their own houses and flats.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before 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 visited the agency offices on 18 August 2022 to review a range of records. This included two people's care records and medication records. We looked at a variety of records relating to the management of the service including routine audits, training data and service improvement plans.

We received feedback from eight care workers and spoke with the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received feedback from one health and social care professional involved in people's care. People were not able to communicate with us directly however, three relatives gave positive feedback about how well people were treated and supported to live independent lives.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had robust and effective systems to help protect people from the risk of harm or abuse and understood their responsibilities to safeguard people from abuse.
- Staff had received training and were clear about how they would report any concerns both internally to the provider and externally to the safeguarding authorities. A staff member said, "If I have any concerns about anyone who uses the service, I report to management immediately." The staff member went on to describe a specific incident they had shared with the management team and told us, "I was updated and given feedback as to what was happening and the outcome."
- People and their relatives told us staff provided safe care for people. One relative said, "I do feel that the care workers provide safe care, I visit [person] every week and can see for myself care workers are committed to [person's] welfare." Another relative said, "I know they staff want [person] to be safe and I have no concerns about [person's] safety."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care plan was developed to remove or reduce the risks. Risk assessments supported people to stay as independent as possible within the confines of their health needs.
- The provider helped ensure people received appropriate support in the event of an emergency. For example, a 24 hour on-call service was available to people, their relatives and staff and emergency cover was arranged for staff sickness or other such events.
- Staff were trained to understand positive behaviour support for each person, how they had to communicate and approach individuals to maximise their well-being and help prevent anxiety.

Staffing and recruitment

- There were enough experienced and skilled staff to ensure people received support safely. People received one to one support when this was needed. Support was flexible for them to do what they liked when they wanted.
- The management team 'matched' staff with people to help ensure their personality matched as well as staff having the right skills.
- The registered manager operated effective recruitment procedures; appropriate checks were undertaken to help ensure staff were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all staff before they worked with people independently.

Using medicines safely

- Staff received the training necessary to support them to safely administer people's medicines. The management team undertook competency assessments once staff had completed their training to ensure safe practice.
- Staff supported some people with administering their medicines and just prompted others to take theirs as needed.

Preventing and controlling infection

- Staff were provided with training and personal protective equipment (PPE) including gloves and aprons to help promote effective infection control. Practice in this area was monitored by the management team during spot checks.
- Staff told us they felt the management team had supported people and staff well during COVID-19. One staff member told us, "We have had training on donning and doffing of PPE, there are also reminder posters in the houses where I work as a prompt. We have also completed an online COVID19 training course. If we need any additional PPE, we call the office and request it. We get supplies weekly of aprons, gloves, masks, COVID-19 tests, hand sanitizer and handwash."
- People and their relatives told us care staff promoted good hygiene practices.

Learning lessons when things go wrong

- The provider took appropriate actions in response to any concerns. Learning was shared with staff by a variety of means including updates, face to face meetings, group supervisions and team meetings.

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 our last inspection we rated this key question Good. The rating for this key question has remained 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

- People's needs were assessed before they started to use the service. Assessments included people's support needs and their individual preferences. These assessments formed the basis of people's care plans and risk assessments.
- People's relatives praised the staff team for the effective care and support they delivered.

Staff support: induction, training, skills and experience

- Staff told us, and records confirmed, they received training and support to understand how to care for and support people safely and effectively. One staff member told us, "If I need any further training, I know I can request it through supervision and in my annual appraisal. For example, a person I support finds it difficult to eat certain types of food. I requested further training on this and attended an eating disorder training course."
- Staff received supervision and competency observations to help ensure they had the knowledge to perform their job roles. Staff said us they enjoyed good support from the management team. A staff member told us, "I feel I have the adequate training, support and supervision to carry out my role to the best of my ability. I have regular supervisions and if I have any concerns, I can ask for a meeting sooner or discuss on the phone with the deputy manager or service manager."
- Inductions for new staff were thorough, and their knowledge was tested during shadow shifts prior to the staff member working with people unsupervised. A staff member told us, "My induction and training went really well and went on for three days and I felt ready to go to a house and meet some people who used the service. I wasn't on my own, I shadowed other staff which was very reassuring."
- People and their relatives praised the staff team for their skills, knowledge and compassion. One relative told us, "Staff are knowledgeable about autism. The depth of knowledge varies from one care worker to another but they are very keen to learn about [person's] particular ways and spend time asking questions and talking to me to learn about these."

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

- People's dietary needs and requirements were identified in their care plans and staff had a good understanding of how to support people with these.
- People chose what they wanted to eat and drink, and staff supported them to learn to cook their own meals and to enjoy eating out.
- Management and staff worked positively with individuals to help promote good nutritional intake and hydration. For example, one person was reluctant to drink, the registered manager purchased a drinking water bottle with time markers on to help encourage the person to increase their fluid intake in small

increments.

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

- The management and staff team worked well with external professionals for the benefit of people who used the service.
- Information was shared with other agencies if people needed to access other services such as hospitals.
- Staff praised the support provided for people with their health needs, especially in a medical emergency. One staff member told us, "A person I support had a medical emergency that needed to be attended to. I reported it to registered manager, who personally took the person to emergency A&E and stayed with them."

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 MCA 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- Staff received training in the Mental Capacity Act and had a good understanding of how to put this into practice.
- Staff empowered and encouraged people to make their own choices and decisions as far as possible.
- Physical restraint practices were not used when supporting people with their moods or anxieties.
- Some people could not give informed consent for some areas of their care. Mental capacity assessments and best interests' decisions had been undertaken involving relatives, independent advocates and health and social care professionals. This helped to ensure all decisions were made in people's best interests.

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 our last inspection we rated this key question Good. The rating for this key question has remained 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

- The management team were passionate about providing people with the support they needed, how they needed it, and in the best possible way for the individual. A staff member told us, "Management are very supportive and, more importantly which I really like, they are approachable. They always put people first, some weekends when they are off they will take some people out for lunch or to see the countryside and see the horses as they know these individuals won't have any family visiting them."
- Staff had a good understanding of the people they supported. Staff took time to get to know people's individual likes and dislikes, their pasts and interests and incorporated these into their care.
- Staff told us they were proud of how the care and support they provided enhanced people's lives and empowered them. One staff member gave an example of a person who had not had any life skills, lacked confidence and found leaving home distressing. With the right support from Fortis Care Hertfordshire the person now enjoyed an active and healthy lifestyle. The staff member said, "The best thing is the biggest smiles and laughing, [the person] is happy which is amazing."
- People and their relatives praised the staff team for the care and support they provided.

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

- People's care plans showed they were consulted about changes to their care and these were documented. Regular reviews of people's support involving people, their relatives and other professionals took place.
- People and their relatives told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives said staff promoted people's privacy, dignity and independence. Staff told us how people were supported to maintain their dignity and increase their independence. For example, a person had been unable to leave their flat due to anxiety. The management and staff team had supported the person to seek the help they needed. This had empowered and motivated the person, they were now able to leave their home and independently travel where they wished to.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained 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

- Care plans were detailed with regards to people's needs, preferences, likes and dislikes. This meant staff had the information available to help ensure people received the right care and support to meet their individual needs.
- Staff told us they were proud to provide personalised care centred on people's individual needs and preferences.
- People's care was adapted to meet their changing needs. For example, as people began to learn essential life skills the support was amended to help maximise independence in other areas.

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 people should get the support they need in relation to communication.

- The provider made information available for people in different formats. This included documents using an 'easy read' format, emotion cards and social stories.
- People's care plans provided very clear information to support staff to communicate with people who used the service. Staff understood people's individual non-verbal cues.

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

- Staff supported people to maintain contact with their friends and families during periods where COVID-19 restrictions meant they could not freely see people. The provider had purchased each person a phone so staff could support video communication with family during COVID-19 restrictions.
- People who used the service led individual lifestyles undertaking activities of interest to them specifically. These included visits with family, shopping, bowling, going to the cinema, going to the pub for dinner and the well-being group. The well-being group involved all people who used the service and created wider opportunities including a gardening club, picnics in the park, visits to a local beauty spot with disability cycling and swimming.
- The registered manager reported many activities had ceased due to COVID-19 and the aftermath. The staff and management team were working to support people to regain their social skills and abilities which had been lost during the period of COVID-19 restrictions. A visiting therapy dog had recently been re-introduced; the registered manager spoke of a person who had significantly benefited from this form of therapy.

- A relative told us about a person new to the service who had been supported to engage in activities outside the home which they had previously refused to get involved in. These included mini golf, dining out in local restaurants and visiting a safari park.
- People were also encouraged and supported to be involved in community activities. For example, one person volunteered at a local food bank.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure in place. Complaints were not commonplace at Fortis Care Hertfordshire. The registered manager advised they worked very closely with people, relatives, commissioners and health professionals and the constant communication meant complaints did not develop. Concerns were recorded, investigated and responded to appropriately.

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 our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider and registered manager operated a robust system of monitoring the quality of the service provided for people. The outcome of monitoring of areas such as staff training, people's care plans and medicine administration was included in the service development plan. This plan demonstrated where areas had been identified for improvement, the actions to be taken, by whom, and in what timescales in order to ensure shortfalls were effectively addressed.
- The manager worked directly with people and the staff supporting them. They encouraged a positive culture amongst the staff team and placed people in the centre of their care.
- The provider and registered manager demonstrated a clear understanding about the duty of candour and encouraged staff to be open and honest in their feedback. Throughout this inspection process we found the registered manager to be very honest and open in their approach.
- The management team and staff understood their roles and respected the impact their roles had for people.

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

- The registered manager had a good understanding of their responsibilities towards the people they supported and demonstrated a strong passion for delivering good quality person-centred care.
- People and relatives told us the management team were responsive, approachable and helpful. One relative told us, "They have been very responsive to any of my questions and have put my mind at ease."
- Staff said they felt proud to work for Fortis Care Hertfordshire. For example, one staff member told us, "Fortis Care [Hertfordshire] values their staff. They help staff develop and grow, above all they recognise staff's hard work and appreciate it. I have personally recommended staff to Fortis Care [Hertfordshire]."

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

- People and their relatives gave positive feedback about the service and how it operated. One relative told us the service had, "Very approachable management, from the very first meeting with them they seemed much more interested in [person] than anything else at all. This gave me confidence [person] was going to be at the centre of their care."
- Staff feedback was sought via satisfaction surveys and face to face meetings with the management team.

- Staff were positive about working for the company. One staff member said, "I definitely would recommend Fortis Care [Hertfordshire]. All the staff I have worked with really genuinely care about the people and really go out of their way to make people's days happier."
- Regular feedback about the quality of the service provided was gathered from people and their relatives.

Continuous learning and improving care; Working in partnership with others

- Learning was taken from incidents to improve people's experience of care.
- The management team worked with external professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists, GPs and dentists.