

Thornton Lodge Care Limited

Fernbank Lodge

Inspection report

346 Heysham Road
Heysham
Morecambe
Lancashire
LA3 2BW

Tel: 01524854936

Date of inspection visit:
25 October 2017

Date of publication:
30 November 2017

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

The inspection visit took place on 25 October 2017 and was unannounced.

Fernbank Lodge is registered to accommodate up to 18 people with personal care needs. Accommodation is provided over two floors, with a stair lift providing access to the first floor. There are a range of communal rooms, comprising of two lounges, two conservatories and a dining room. There are small garden areas at the front and rear of the home, with seating for people to use during the summer months.

At the last inspection in October 2015 the service was rated Good. At this inspection we found the service remained good.

People who lived at the home told us they had agreed the level of support they required to help them achieve their goals. Staff were able to explain the support individuals required and the way in which they supported people who lived at the home.

Risk assessments were carried out to ensure risks were identified and minimised. Staff were knowledgeable of these and people who used the service told us they felt safe. Care plans detailed the actions required by staff to minimise identified risk.

People at Fernbank Lodge told us they were happy with the number of staff available to support them. We were told, "I only have to ring that bell and it's like they can fly, they come to me that quick." And, "There's enough staff here and they're well organised, that's the key."

Medicines were managed safely. Staff responsible for supporting people with their medicines had received training to ensure they had the competency and skills required.

Recruitment checks were carried out to ensure suitable people were employed to work at the service. People spoke highly of the staff employed to support them. They told us they had no concerns with the staffing at the home and they considered staff to be helpful and caring

We found people had access to healthcare professionals and their healthcare needs were met. People told us they were supported to access further healthcare advice if this was appropriate and they were happy with the care and support provided. One person who lived at the home told us, "This is a good home, with good care and good staff."

People who lived at Fernbank Lodge told us they liked the meals provided at the home. We found people were provided with meals and drinks that met their individual preferences and needs. Comments we received included, "The food is second to none here." And, "I've just had homemade salmon fishcakes because I wanted them. They were delicious."

The registered manager and a quality auditor employed by the registered provider carried out checks to identify where improvements were required. Staff told us they were informed of the outcomes of these. The registered manager explained the checks were not always documented.

We have made a recommendation regarding quality assurance.

We found people who received support were empowered to raise their views on the service at Fernbank Lodge. Meetings and surveys took place to enable people to give feedback to the management team.

There was a complaints procedure which was known to people who used the service. People told us they had no complaints, but they were confident the registered manager would respond to any complaints made. People told us they liked the registered manager. One person commented, "Registered manager is like a daughter to me."

People who lived at Fernbank Lodge told us they enjoyed the activities provision at the home. We were told, "We do exercises in chairs, now that's a good shout." And, "I go to the things I like to go to."

The registered manager demonstrated their understanding of the Mental Capacity Act 2005. Staff were able to give examples of how they supported people to make decisions. We found where people's rights were restricted, this was done lawfully.

Staff told us they were proud to work at Fernbank Lodge and they enjoyed supporting people to live happy lives. Staff received appropriate training and development opportunities to enable them to maintain their skills and knowledge. Staff told us they found the registered manager and registered provider to be approachable and praised the way they were supported.

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 remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service was well-led. Notifications to the Care Quality Commission were made as required. Staff told us they were supported by the registered manager who sought the views of people who lived at the home. Quality checks were carried out to identify shortfalls in the service provided.	Good ●

Fernbank Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Fernbank Lodge 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. This inspection visit took place on 25 October 2017 and was unannounced.

The inspection team consisted of one adult social care inspector.

Before our inspection visit we reviewed the information we held on Fernbank Lodge. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the home. We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help plan our inspection effectively.

Prior to the inspection we also contacted the commissioning department at the local authority and health professionals who had experience of working with the service. We did this to support our inspection planning. We received consistently positive feedback from the health professionals we spoke with.

We spoke with a range of people about the home including six people who lived at the home, three relatives and three staff members. In addition we also spoke with the cook, the clinical advisor for the organisation and the registered manager.

We looked at care records of four people who lived at the home, training and recruitment records of staff members and records related to the management of the home.

We spent time in communal areas of the home. This allowed us to observe the care and support people received. We also walked around the home to check the environment was suitable for the people who lived there.

Is the service safe?

Our findings

People who received support told us they felt safe living at Fernbank Lodge. People told us, "I would say if I wasn't safe but I am and I've never seen anything untoward here." And, "I feel safe here. I didn't when I lived alone." Relatives we spoke with commented, "[Family member] is very safe." And, "I've no concerns with [family member's] safety here."

There were assessments in place to identify risks. Care plans contained information on how risks were to be minimised. Staff we spoke with confirmed they were aware of the risk assessments and care plans. During the inspection we saw one person being supported with their mobility. We checked the person's care record and found the care and support provided was in accordance with the written instructions. This demonstrated staff followed the assessments and care records in place.

Staff told us they would report any safeguarding concerns to the registered manager or to the registered provider. We saw a safeguarding procedure was in place to guide staff and the number for the Lancashire safeguarding authorities was displayed on notice boards within Fernbank Lodge. This meant staff, visitors and people who lived at the home were able to report any concerns to allow further investigations to be carried out, if required.

We viewed documentation which demonstrated staff were recruited safely. We spoke with staff who confirmed references and a Disclosure and Barring Service (DBS) check were obtained prior to them starting work at Fernbank Lodge. A DBS check helped ensure only suitable staff were employed. This meant checks were carried out to help ensure only appropriate staff were employed.

People who lived at the service told us they were happy with the staffing provision at Fernbank Lodge. We were told, "I only have to ring that bell and it's like they can fly, they come to me that quick." A further person said, "There's enough staff here and they're well organised, that's the key." Relatives we spoke with expressed no concerns regarding the staffing provision at the home. Staff we spoke with told us they had sufficient time to spend with people and they had no concerns. We discussed staffing with the registered manager. They told us if extra staff were required, these were provided. We reviewed the rota and saw if people needed support to attend external appointments, additional staff were provided. We were informed a clinical advisor was employed to support staff in the development of effective care plans. We spoke with the clinical advisor who confirmed this was the case. This demonstrated staffing was arranged to meet the needs of people who lived at Fernbank Lodge.

We checked to see medicines were managed safely. We saw people were supported to take their medicines individually and records were completed at the time of administration. We checked a sample of Medicine and Administration Records (MAR). We also checked the medicines and the totals of medicines on the MAR matched. We found no errors in the medicines we checked. This indicated medicines had been administered correctly. There were procedures in place to ensure the safe receipt and disposal of medicines. Staff we spoke with were able to explain these to us. This showed staff were familiar with the processes in place to help ensure medicines were managed safely. We looked at the arrangements for 'when required'

medicines. We saw some limited information was available in care records to support staff on when and why these medicines should be administered. Staff we spoke with were able to explain what the medicines were for and why and when these would be given to individuals. We discussed this with the registered manager. They told us they would review the way in which information was documented in order to ensure appropriate instructions were in place. Prior to the inspection concluding we saw evidence this had taken place.

We found the home was clean with hand sanitising gel and hand washing facilities available around the premises. We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. We found equipment had been serviced and maintained as required. Records confirmed gas appliances and electrical equipment complied with statutory requirements and were safe for use. We noted contact details of a maintenance person and external contractors were available to staff. This demonstrated there were arrangements in place to ensure the environment and equipment was appropriately maintained.

Is the service effective?

Our findings

People told us they were happy with the care provided. We were told, "This is a good home, with good care and good staff." And, "The staff know me. I don't have to remind them of what I need or want for that matter." Relatives we spoke with told us, "[Family member] is well looked after. The care is excellent."

Staff told us they received training to enable them to deliver good care. They also told us they received supervisions and appraisals with the registered manager to enable them to discuss their performance and any training needs. We viewed documentation which confirmed this. This meant staff performance was reviewed and training provided to enable staff to maintain and develop their skills.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are 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 were being met. The registered manager demonstrated an understanding of the legislation as laid down by the MCA and the associated DoLS and we found applications to deprive people of their liberty were made in accordance with legal requirements. Staff we spoke with told us if they were concerned about a person's mental capacity, they would speak with the registered manager to ensure people's rights were upheld.

People told us they consented to the support they received. One person described how they had been involved deciding the support they required regarding their mobility. They told us staff had supported them to understand the options available to them and associated risks. This demonstrated people were consulted and consent was sought prior to care and support being provided. Within the care records we viewed, we did not see evidence that people had consented to their care. We discussed this with the registered manager who told us they would address this.

We viewed the kitchen area and found this was clean and well stocked with a variety of different foods and provisions. People told us they were able to eat meals which met their preferences and nutritional needs. People told us the meals were varied, tasty and if requested, an alternative was arranged. During the inspection we saw people could choose where they wished to eat and were provided with the meal they had chosen. Comments we received from people included, "The food is second to none here." And, "I've just had homemade salmon fishcakes because I wanted them. They were delicious." We noted if people required support to eat this was provided with patience and people were offered second helpings if they finished their meal.

Care records we looked at contained information about other healthcare services that people who lived at the home had access to. Staff had documented when individuals were supported to attend appointments or received visits from for example, Speech and Language Therapists, GP's and district nurses. Documentation was updated to reflect the outcomes of professional health visits and appointments. This meant staff had access to up to date information in order to support people effectively.

Is the service caring?

Our findings

People told us staff were caring and they liked the staff. Without exception, all the people we spoke with praised the approach of staff and the registered manager. Comments we received included, "I don't know what I'd do without them. They've become my friends and allies." Also, "You feel loved here actually." In addition, "Registered manager has a wonderful attitude. A this is your life attitude." Relatives told us, "All the staff are helpful and terribly accommodating."

Staff we spoke with told us they were committed to helping people live the best life they could and they were supported to do so by the management team in place. One staff member told us, "I love it here. Management are excellent, this is where I would want my parents to be." Another staff member said, "I fit in with what people want. This is their home and their life, who am I to expect them to change to suit me!" During the inspection we saw staff were caring. We saw staff and people who lived at the home had a positive rapport. People approached staff and used appropriate touch to emphasise their emotions. We saw this was reciprocated by staff. This demonstrated staff had a caring attitude.

People told us they felt respected and their privacy was respected. We were told, "Oh yes, they always knock and I tell them to come in." Also, "Staff know I like private time and don't disturb me." During the inspection we saw staff knocked at people's doors and waited for an answer prior to entering. We also found that if staff needed to pass on confidential information, this was done in a private area so people's privacy and dignity was maintained.

We found when agreed, people's end of life wishes had been recorded so staff were aware of these. We saw people were supported to remain in the home where possible when they had expressed a wish to do so. This allowed people to remain comfortable in an environment that was familiar to them and supported by staff who knew their needs and wishes. We saw documentation that evidenced people's funeral wishes were carried out as they had wanted them to be. This demonstrated the service respected people's decisions and wishes following their death.

Relatives told us they were welcomed at the home and they were able to visit when they wished to do so. They told us this was reassuring to them as they could see their loved one whenever they wanted and they were welcomed at Fernbank Lodge. We saw interactions between staff and relatives were warm and positive. Relatives told us they considered staff to be caring. They told us, "They're very good, they look after me as well." A further relative said, "All the staff appear very caring."

We spoke with the registered manager about access to advocacy services should people require their guidance and support. The registered manager told us details were made available to people as required or requested. In addition, advocacy services would be arranged if people needed support to do this. This ensured people's interests would be represented and they could access appropriate support outside of Fernbank Lodge if needed.

Is the service responsive?

Our findings

People who used the service told us the registered manager and staff were responsive and met their needs with an individual approach. One person told us they liked to get up at a certain time and this was accommodated. They said, "I'm an early riser and staff are always here with a cup of tea to help me."

Care records we viewed confirmed people's needs were individually assessed and care plans were developed to meet their needs. The records we viewed demonstrated people were involved in the planning of their care. We saw information was gained by speaking with people and their relatives. We also found people's individual requests were accommodated. For example we saw one person asked if they could have help to bathe. We noted the time they wanted the help was arranged with them. We spoke with the person who told us, "It won't be a problem, it never is."

People told us there were activities to take part in at Fernbank Lodge. One person said, "I go to the things I like to go to." A further person said, "We do exercises in chairs, now that's a good shout." A third person told us, "You should have come a few weeks back. We went to Blackpool and had fish and chips. It was lovely." During the inspection we found staff supported people to take part in activities. We heard people having a sing song and in addition, people were encouraged to pursue individual pursuits. For example we saw a staff member sat with a person and read a paper with them, and a further staff member helped a person to decide what to watch on television in the evening. This demonstrated people were helped to follow areas of interest that were important to them. Relatives we spoke with confirmed their family members were encouraged to participate in activities. One relative said, "[Family member] joins in the activities [family member] likes and goes out on activities as well."

During the inspection we heard people discussing the external trip out. We heard people deciding where they wanted to go and what they wanted to do. We discussed this with the registered manager. They told us they asked people what activities they wanted and sought to provide them. This demonstrated the registered manager encouraged people to identify what activities were important to them.

Fernbank Lodge had a complaints procedure which was available on the notice boards within the home. We reviewed the complaints procedure and saw it contained information on how a complaint could be made. The procedure also contained information of other agencies who could be contacted if the complainant was unhappy with the response they received. This demonstrated the service provided information to support further inquiries to be made. We spoke with people who lived at Fernbank Lodge. They told us they knew how to make a complaint if they were unhappy and they were confident this would be investigated. They told us they would speak with the registered manager who they knew would listen to them. One person commented, "I can tell you that I would complain and I know [registered manager] would look into it."

Staff we spoke with told us they supported people to make complaints. They explained people's rights to complain were respected and any complaints would be passed to the registered manager to enable any investigations to take place. One staff member told us, "We would always report complaints; it's the only

way to sort a complaint out." This demonstrated there was a complaints procedure, of which staff were knowledgeable, to enable complaints to be heard.

Is the service well-led?

Our findings

There was a registered manager employed at Fernbank Lodge. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection in October 2015, this domain was rated as 'Requires improvement.' This was as it is a requirement that the Care Quality Commission (CQC) is notified of certain events that occur. At the last inspection we found not all required events had been notified to us. At this inspection in October 2017, we found evidence that all required notifications had been submitted to the CQC as required.

People who lived at Fernbank Lodge told us they considered the service was well run. They told us the service was well organised, staff knew them well and they liked the registered manager. One person told us, "I can't think how it would improve." A further person commented, "[Registered Manager] is like a daughter to me." Relatives we spoke with told us they considered the registered manager to be approachable and the home was well run. One relative said, "I think it's really well run." During the inspection we saw the registered provider visited the home. We saw they knew people and staff by name and people were happy to see the registered provider. One staff member told us the registered provider often visited the service to check how the home was performing and how people were. They said, "[Registered provider] is very good, very committed to being a good employer and making sure we give good care." This demonstrated the registered provider took an active role in the service provided.

Staff we spoke with were able to explain their roles and responsibilities and spoke positively of the support they received. They told us they were supported by the registered manager and also by senior management. One staff member said, "[Registered manager] is amazing. Totally for the residents and there for us as well." A further staff member said, "I'm proud to work for a manager that expects such high standards."

We found staff meetings were in place to ensure staff were able to raise any concerns and to remain up to date with any changes. Staff told us they welcomed the meetings as it enabled them to discuss the service they provided. One staff member said, "I like them. We all get together, we all share our views, we're supported and feel valued."

During the inspection we heard people discussing the external trip out. We heard people deciding where they wanted to go and what they wanted to do. We discussed this with the registered manager. They told us they wanted people to influence the service provided and asked people for their views both formally and informally. We saw evidence that surveys were provided to people who lived at the home. In addition, we were told 'resident and relative meetings' were held to enable people to influence the way in which the service was run. This was confirmed by looking at minutes of meetings. We saw people were asked to share their opinion of the care they received and they considered this to be good. We also noted people had asked for a change to be made to the menu. We checked the menu and saw the requested change had been made. This demonstrated feedback was sought and comments actioned to respond to suggestions.

The registered manager and registered provider had auditing systems to assess quality assurance and drive improvement. The registered manager told us they carried out checks on care records, falls, accidents and incidents, people's weights and medicines to ensure they were managed safely. We saw people's weights were monitored and action was taken if a concern was noted. For example we saw a referral had been made to a dietician to ensure an expert opinion was gained. In addition, the registered manager told us they completed audits of accidents and incidents to ensure any trends were identified. They explained they had noted a person had fallen on more than one occasion and as an action, the person had been referred to an external health professional for further professional advice. This demonstrated audits were carried out and actioned to improve the care and support people received.

The registered manager explained that a variety of quality audits were also carried out by a quality auditor employed by the registered provider and we saw evidence of this. We asked the registered manager what checks they carried out on the medicines to ensure they were safely managed. The registered manager told us they regularly carried out checks on availability and quantities of medicines and checked medicine administration records for accuracy. They said these were not currently documented, however they would explore this.

We recommend the service seeks and implements best practice guidance in the documentation of quality audits.

The service had on display in the reception area of the home their last CQC rating, where people who visited the home could see it. This is a legal requirement from 01 April 2015.