

Ryan QC Homes Ltd

# Farthings

## Inspection report

86 Lumbertubs Lane  
Northampton  
NN3 6AH

Tel: 01604643726  
Website: [www.ryanqchomes.co.uk](http://www.ryanqchomes.co.uk) □

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14 March 2019

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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:

Farthings is a care home registered to provide accommodation and personal care support for up to six younger and older adults with a learning disability, autistic spectrum disorder, physical disability and dementia. Six people were living at Farthings, at the time of inspection only two of these people received the regulated activity of personal care.

### People's experience of using this service:

- The service worked within the principles and values that underpin Registering the Right Support and other best practice guidance. This ensured that people could live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control over their own lives, choice, and independence.
- People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- People were empowered to achieve their hopes and dreams by staff that were kind and caring and enjoyed spending time in their company.
- Staff always promoted people's independence.
- People and their relatives were involved in reviewing care delivery to ensure it was meeting people's individual needs,
- Regular keyworker reviews enabled people to discuss what was working and not working for them, so they could be supported to address any issues or concerns.
- People's privacy and dignity was respected. People's diverse needs were embraced, and staff supported people to express their individuality.
- People and staff felt valued by a management team that was passionate about enabling people to achieve their hopes and dreams and to challenge discrimination.
- Staff were supported by a management team that was well-led
- People knew how to raise a complaint and felt confident these would be addressed to their satisfaction.
- People received safe care from staff that understood how to recognise and protect them from abuse. Staff had received training relevant to their role and were well supported by the management team.

### Rating at last inspection:

This is the first comprehensive inspection under this registration. The service was registered on 21 March 2018.

### Why we inspected:

This was a planned inspection.

### Follow up:

Going forward we will continue to monitor this service and plan to inspect in line with our re-inspection schedule for those services rated Good.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 was safe.

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

# Farthings

## 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 team consisted of one inspector.

#### Service and service type:

Farthings is a care home registered to provide accommodation and personal care support.

The service had two managers 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:

We gave the service 48 hours' notice of the inspection visit because it is small, and the registered managers is often out of the office supporting staff or providing care. People also had their own commitments during the day. We needed to be sure that they would be in.

#### What we did:

The provider completed a Provider Information Return (PIR). This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

The inspection started on the 13 March 2019 and ended on 14 March 2019. During our inspection we spoke with one person, one relative, two registered managers, the compliance manager, a human resources manager, one team leader and two carers.

We reviewed information we had received about the service. This included details about incidents the

provider must notify us about, such as abuse; feedback from the local authority, professionals working with the service and the clinical commissioning group (CCG). We used this information to plan our inspection.

During the inspection we reviewed:

Two people's care records, three staff recruitment files and documents relating to the management of the service such as policies, audits, meeting minutes and safeguarding records.

# 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:

- People told us they felt safe living at Farthings.
- Safeguarding systems and processes were in place and embedded in practice. The compliance manager ensured all notifiable incidents were referred to the Local Authority and CQC.
- The management team had investigated safeguarding concerns to ensure people received safe care.
- Staff knew how to recognise abuse and protect people from the risk of abuse.
- Staff felt confident about whistleblowing, and had been provided assurance by the management team they would be supported if they raised a concern. One staff member told us, "[Management team] say you won't lose your job and will be respected and supported if you raise a concern."

Assessing risk, safety monitoring and management:

- Comprehensive risk assessments were in place and updated as and when people's needs changed.
- The provider made best use of assistive technology to keep people safe. One person wore a watch at night that alerted staff if they fell whilst out of bed. This enabled staff to attend to them promptly and reduced the person's anxiety.
- Emergency evacuation plans were in place to ensure people and staff knew how to leave Farthings safely in the event of a fire.
- Farthings had a four-star food hygiene rating from the local authority. This demonstrates good food hygiene standards.

Staffing and recruitment:

- Staffing ratios were reviewed monthly by the management team to ensure there were enough suitably trained staff to meet people's needs.
- People told us staff were always available to meet their needs. One person told us, "I press the red button on [assistive technology] and they [staff] come and help."
- Comprehensive recruitment checks had been undertaken to ensure people were protected from being supported by unsuitable staff. This included seeking an enhanced disclosure and barring service (DBS) check and references.

Using medicines safely:

- Staff followed safe protocols for the receipt, storage, administration and disposal of medicines.
- People received their medicines when they should and as prescribed. They were supported to take their medicines independently where they could do so. One person told us, "[Staff] say [name] come and get your tablets."
- Protocols were in place for the administration of as required medicines, these provided enough detail for staff to know what medicines to give and when.

- Staff received medicines training and undertook competency assessments prior to administering medicines.

#### Preventing and controlling infection:

- Some people had been supported to undertake food hygiene training.
- Staff had a good knowledge of infection control requirements.
- Staff had access to personal protective equipment such as gloves and aprons, these were used appropriately during personal care to minimise the spread of infection.
- We observed the environment to be clean and odour free.

#### Learning lessons when things go wrong:

- Accidents and incidents were regularly audited to check for trends or patterns and identify learning. For example, a commode had been introduced to minimise the risk of a person falling whilst getting up to use the toilet at night.



# 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:

- There was a focus on assessing, planning and delivering care and support that focussed on people's physical, spiritual, psychological and social needs.
- The service used assistive technology to empower people to be more independent whilst maintaining their safety, and delivering high quality care and support. Such as watches to alert for falls and epilepsy monitors.
- Care and support was regularly reviewed with people and where appropriate, their relatives. Reviews were tailored to meet people's communication and healthcare needs.
- Staff applied learning effectively in line with best practice guidance relevant to the needs of people receiving support.

Staff support: induction, training, skills and experience:

- People were involved in the recruitment of staff. They asked questions important to them during interviews and had an influence on the outcome. People's views were also sought on staff's performance to inform supervisions, appraisals and probation reviews.
- An induction programme was in place for new staff. This included shadowing more experienced staff until confirmed as competent and people were happy to be supported by them.
- Staff received suitable training to ensure they had the skills to do their job. In addition to undertaking training the provider deemed mandatory, staff had undertaken additional training relating to people's individual needs such as epilepsy.
- There was a proactive support and appraisal system that recognised the need for continuous development to enhance the quality of care people received. Staff felt well supported by the management team.
- Staff told us they were empowered to further develop their knowledge and expertise. One staff member told us, "I have been supported to do my NVQ level 3 and a team leader course since I have been here."

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

- There was a strong emphasis on the importance of eating and drinking well and people were encouraged to make healthy food choices. People had a variety of options to choose from each day. • People were fully involved in planning their meals taking nutritional advice into account. Pictures of meals, snacks and drink were available to support people choose meals.
- Staff were aware of people's preferences and eating patterns and there was flexibility when requested. People looked forward to having a take away every week. One staff member told us, "I can go to three different take away on a Saturday, if needed."
- We observed a staff member ask one person what they would like for their lunch, they requested a smoked salmon and cream cheese bagel. This person's request was fulfilled.
- We observed mealtimes to be a relaxed and social occasion, with lots of laughter.

- Records showed referrals were made to speech and language therapists (SALT) and dieticians for advice and support regarding people's eating and drinking needs when needed. We saw feedback from a SALT that said, "The [provider] have showed me that they are a committed to improving the lives of people with learning disabilities."

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

- Staff, teams and services were committed to working collaboratively to deliver joined-up care and support to people.
- Staff communicated well with other each other, the management team ensured information from other agencies was promptly communicated to the staff team.
- Reviews were undertaken with commissioning authorities to ensure Farthings continued to meet people's individual needs.
- We saw feedback from a healthcare professional that stated, "[Staff] are hardworking, willing to learn and engage with health professionals well

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

- People were proud to show us how they had personalised their rooms and were empowered to be engaged in the decoration to the best of their ability.
- Communal areas at Farthings were being redecorated at the time of our inspection. People had chosen the décor for the bathroom, lounge and kitchen, and had chosen the worktops and cupboard doors for the kitchen from samples.
- There were different areas at Farthings for people to use for their preferred activities, and private space to spend time with their families or visitors, or to have time alone.

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

- Staff recognised when people needed healthcare support and promptly co-ordinated appointments with professionals.
- Excellent working relationships had been formed with health and social care professionals. We saw positive feedback from a social worker, physiotherapist, speech and language therapist, health facilitator and epilepsy nurse specialist.
- People were empowered to make choices about their health and how it should be monitored and managed. One person was supported to recognise when they were unwell at night with their diabetes and had a bell to call for assistance if required.
- Some people had complex healthcare needs. Staff sought to improve their care treatment and support by identifying and implementing best practice. A healthcare professional said, "I always find that [staff] who attend appointments with [people] have all the necessary information needed for the appointment. They also have excellent relationships with [people] and help support them to achieve their health goals."
- Clear and concise records were kept regarding people's health needs to inform healthcare appointments.

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. 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 provider had appropriately submitted Deprivation of Liberty Safeguards (DoLS) applications to the local

authority.

- Where people lacked capacity decision specific mental capacity assessments had been completed and best interest decisions made in consultation with the person, key professionals and relatives taking into consideration legislation and people's wishes. MCA paperwork had been reviewed following feedback from people and professionals.
- People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- Staff recognised people's right to make unwise choices. For example, a staff member told us, "If it's cold I could recommend not going out without a coat, however it is their [peoples] choice."

# 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:

- Throughout our inspection we observed warm, kind and caring interactions between people living at Farthings and staff. There was a lovely homely atmosphere with lots of laughter.
- Staff had developed positive relationships with people and enjoyed spending time with them. One person told us, "Staff are good to me, when I tell them there is something wrong they help me, they know me well... They [staff] are brilliant with me."
- We saw feedback from a healthcare professional that stated, "I have always observed [staff] to be professional, compassionate and act as excellent advocates for the [people]."
- A staff member told us, "Everyone cares here."
- People were supported by staff with similar interests that knew them well. A staff member told us, "Keyworkers are allocated based on people's hobbies interests and preferences."
- To ensure people had consistent care and their needs were always met, the management team provided people's care themselves if there was a shortfall in staffing.
- Some people had lived together a long time, they had developed strong friendships with each other and enjoyed spending time together.
- Staff completed training in equality and diversity. They were committed to ensuring people's equality and diversity needs were met and felt confident challenging discrimination.
- Staff were committed to ensuring people's needs were well met and often went above and beyond. One staff member told us, "I try to always take [name] to health appointments, I may come in on my day off."
- People were supported to maintain relationships with family and friends. Visitors were always welcome at Farthings.

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

- People had access to an advocate if they needed to have someone to help them speak up about their care.
- There was an emphasis on supporting people to be heard. The provider had developed Residents Rights and Safe Care leaflets, which were discussed in weekly meetings to support people to express their views.

Respecting and promoting people's privacy, dignity and independence:

- People's privacy and dignity was respected. We observed staff to knock on people's doors and seek permission to enter their rooms.
- People's independence was promoted. A lunch club at a local pub assisted in promoting independence as people chose, ordered and paid for their own meals.
- Staff recognised the importance of confidentiality and people's care records were stored securely.
- The provider had considered the impact of the General Data Protection Regulation and had introduced measures to protect people's personal data.

## 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:

- People's care plans reflected their individual needs. They detailed people's like, dislikes, preferences, routines, communication needs and how staff could best support them. One person told us, "[Staff] know what I like and don't like."
- People and their relatives were fully engaged with care plan reviews as and when people's needs changed.
- Staff told us care plans contained more than enough information about people's needs and all staff we spoke with knew people well.
- People had 'aspirations' plans which considered how to support them to achieve their hopes and dreams. For example, going on holiday and gaining employment.
- People met with their keyworker a minimum of weekly to identify what was working or not working for them and agree goals. Records showed action had been taken following meetings such as co-ordinating a hairdresser appointment and shopping for holiday items.
- The service identified people's information and communication needs by assessing them. Staff understood the Accessible Information Standard. People's communication needs were identified, recorded and highlighted in care plans. These needs were shared appropriately with others.
- People living at Farthings were not always able to express their needs vocally. We saw evidence that the identified information and communication needs were met for individuals. For example, picture cards were used to support people to make mealtime choices.
- People accessed activities of their choosing. Some people accessed a day centre, other people chose to engage in their hobbies and interests from home.
- One person told us, "[Staff] goes wherever I go." On the day of the inspection one person asked the registered manager if they could go for a walk and out for lunch, this was promptly facilitated.
- Once a week people receiving care from the provider could meet at a local pub for lunch and play bingo. People looked forward to meeting their friends and talked about shared hobbies and interests.
- People had been consulted about the replacement of the kitchen and had expressed a desire to go on holiday whilst the work was being undertaken, they had chosen a holiday location together. One person told us, "I wanted to go to [holiday location], I will make a scrap book and keep it safe."
- Feedback from visiting professionals showed the service was focused on providing person-centred care and support. One healthcare professional said, "The [provider] has showed me that they are a committed to improving the lives of people with learning disabilities, they provide person centred care in warm and caring environment."
- People were supported by staff during hospital admissions. We saw feedback from a healthcare professional that said, "[Staff] have supported individuals during their stay at hospital. This has provided familiarity and consistency of care and made their hospital experience less daunting."

Improving care quality in response to complaints or concerns:

- The provider had a clear procedure and policy in place to manage complaints and feedback.
- Easy read complaints information was displayed in the home. People were also able to raise concerns during weekly house meetings and felt confident these would be addressed.
- Concerns and complaints were investigated by the management team, individualised action plans were developed to ensure the resolution to the complaint was satisfactory to the person receiving care and people received a personalised, complaint outcome letter. Records showed complaints had been appropriately addressed.

End of life care and support:

- At the time of the inspection no one was receiving end of life care.
- Should people come to the end of their lives, the provider told us, they would complete an end of life plan that documented their wishes for treatment and support people to remain at Farthings where possible.
- When a person that had moved from Farthings reached the end of their life, staff and the management team provided care and support to the person in hospital as they had developed caring relationships together.

# 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.

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

- There were two registered managers in post. Both understood the regulatory requirements and had submitted legally required notifications and evidenced lessons learned when things went wrong.
- Robust quality assurance systems were embedded and included internal and external audits to identify required improvements. These were effective, reviewed regularly and reflected best practice.
- Staff received training to ensure people received support appropriate to their needs. There was a focus on developing staff to achieve better outcomes for people. The provider had supported Team Leaders to undertake leadership training, this equipped them with the skills to more effectively manage the staff team.
- Staff were treated equally. There was a high level of job satisfaction and staff were proud of their work. Without all staff told us they loved their job and provided positive feedback regarding the support from the management team.
- Staff, people and relatives were complementary of the management team and told us they would recommend the service.

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

- The provider ensured they met the regulatory requirement to be open and transparent with people using the service when things went wrong by liaising with people and their families and involving them in investigations.
- People were at the heart of everything the service did and were consulted about every aspect of their care. People's care was delivered as they chose and took into consideration their individual and diverse needs.
- People were supported to achieve their hopes and dreams by staff that were passionate about supporting people to live their best life possible.
- The management team had a visible presence. We observed kind, caring and warm interactions between the registered managers and people. People looked forward to seeing members of the management team.
- The provider was passionate about ensuring people were given equal opportunities and knew their rights. They had developed and were proud of an easy read 'Fundamental standards' leaflet that helped people identify the standards of care they should expect.
- The provider wrote to people to let them know when they had made a safeguarding referral or notified CQC about an incident. Correspondence detailed measures people could take to keep themselves safe such as putting the light on before going down the stairs at night.

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

characteristics:

- There were consistent high levels of constructive engagement with staff, relatives and people.
- People and their families were asked for feedback during reviews and via annual surveys. This was used to drive improvements.
- People were involved in the development of easy read satisfaction surveys.
- Regular staff and team leader meetings took place to share best practice, to discuss people's needs and to identify improvements.
- People met with their key workers regularly to provide feedback regarding the care they received, they were also empowered to provide feedback on staff's performance to inform supervisions.

Continuous learning and improving care:

- The senior management team met regularly to discuss the improvements required for the service. For example, introducing weekly spot checks and leasing a vehicle for the use of people living at Farthings.
- During our inspection Farthings was undergoing refurbishment to improve the living environment.
- Staff told us the management team welcomed suggestions for improvements. One staff member told us, "[The management team] are receptive to any changes and improvements."
- The provider was in the process of recruiting team managers to oversee the team leaders in each home and drive further improvements.
- The provider communicated areas for improvement in a monthly newsletter and during staff meetings to enhance the quality of care people received.

Working in partnership with others:

- Farthings worked in partnership with people, their relatives, social workers, commissioning authorities and sought support from other health professionals promptly as needed.
- We saw positive feedback from many professionals involved in the care of people living at Farthings. One healthcare professional said, "I would recommend the service as a whole as a Learning Disability provider." A social care professional said, "[People] have stated that they are happy with the placement and would like to stay there [Farthings] long term."
- The provider told us of plans to open a café to provide employment opportunities for people receiving care from the provider, to enhance their community presence and to offer support and guidance to other people.