

Housing & Care 21

Housing & Care 21 - Farmers Court

Inspection report

Farmers Court
Charolais Close
Rugby
Warwickshire
CV21 3AR

Tel: 03701924458

Website: www.housing21.co.uk

Date of inspection visit:
13 April 2018

Date of publication:
21 May 2018

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 took place on 14 April 2018 and was announced. We gave the provider two days' notice of our inspection visit so we could be sure the registered manager was available to speak with us. Housing and Care 21 is a large provider of care services.

Farmers Court provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted accommodation in a shared site or building. The accommodation is rented, and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support services. There were 29 people living at Farmers Court who received personal care from care staff in their own homes. These arrangements ensured people lived as independently as possible.

Not everyone using Farmers Court received the regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

There was an experienced registered manager in post. A requirement of the service's registration is that they have a registered manager. 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 our previous inspection in November 2015 we rated the service as 'Good' overall, but 'Requires Improvement' in Well-led. At this inspection we have rated the service as 'Good' in all areas. There had been changes in the management team since our previous inspection, and people's feedback about how the home was managed was positive.

The vision of the staff and management team at Farmers Court was to assist people to remain as independent as possible whilst living in their own homes. Staff were enthusiastic and positive about their work in enabling people to remain independent.

People were encouraged and supported by caring and compassionate staff to follow their agreed care plans. Staff were well trained and effectively used their skills and knowledge to develop relationships with people and respond to people's individual needs.

Staff understood their responsibilities to keep people safe and protect them from harm. Policies and guidance were accessible to staff to remind them how to raise concerns following the provider's safeguarding policies. Risks to people had been assessed and risk mitigation plans were in place to instruct staff on how to support people safely.

People had their prescribed medicines available to them. Staff supported some people to take their medicines, and other people were able to manage their own medicines and were encouraged to do so. Staff received training in the safe handling, administering and recording of people's medicines.

People were involved in planning their own care. Staff read people's care plans and received an induction and training so that they knew people well. Further training took place to update and refresh staff skills and knowledge.

The registered manager and staff understood their responsibility to comply with the requirements of the Mental Capacity Act (2005) and worked within the principles of this.

Health and social care professionals were involved in the planning and delivery of people's care; staff followed the guidance given by health and social care professionals. People's agreed care and support was reviewed when required.

People said staff were kind and respectful toward them. People's feedback on the service was sought by the provider, and feedback was acted upon. People told us they felt they could raise concerns or complaints if they needed to.

The provider and registered manager had quality monitoring processes which included audits and checks on medicines management, care records and staff practices. Where improvement was identified, action was taken.

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 remained safe.

People felt safe living at Farmers Court and staff had been recruited safely. The registered manager and staff consistently reported and investigated accidents, incidents and safeguarding issues when these arose, and analysed the outcomes to learn from them. People had up to date risk assessments, which provided staff with the information they needed to minimise risks to people. There were enough staff employed to ensure safe care for people. Medicines were administered to people safely.

Good ●

Is the service effective?

The service remained effective.

Staff completed an induction and training so they had the skills they needed to effectively meet people's needs. Staff worked with people in line with their agreed care plan; putting training skills and knowledge into practice. People made choices about their care. People were supported to access healthcare professionals when needed. People received food and drink that met their preferences and health needs.

Good ●

Is the service caring?

The service remained caring.

Staff knew people well and respected people's privacy and dignity. Staff treated people with care and kindness. People made decisions about how their care and support was delivered.

Good ●

Is the service responsive?

The service remained responsive.

People were supported to take part in social activities where this was agreed in their care plan. People had personalised records of their care needs and how these should be met. People were able to raise complaints and provide feedback about the service. There was end of life care planning in place, where appropriate,

Good ●

which took into account people's wishes and preferences.

Is the service well-led?

The service was well led.

The provider's philosophy, vision and values were shared by the staff. People were asked for their feedback on how the service should be run, and feedback was acted upon. Quality assurance procedures were in place to assess areas where the service could make improvements. The provider sought advice from specialists in their field, and shared information across their services, to improve the quality of care people received.

Good ●

Housing & Care 21 - Farmers Court

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.

This fully comprehensive inspection took place on 13 April 2018 and was announced because the service provides personal care to people in their own homes. We gave 48 hours' notice of our inspection to be sure people and staff would be available to talk with us. The inspection was carried out by one inspector.

Before our inspection visit, we looked at and reviewed the Provider's Information Return (PIR). This is a document that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We found the PIR reflected the service provided.

The provider sent us a list of people who used the service, staff, and stakeholders before our inspection. We sent questionnaires to people who used the service, but only received one response. We also sent questionnaires to staff and received one response. In addition we gained feedback from a health professional who had regular contact with people who used the service. We looked at the feedback from the questionnaires and reviewed the information to form part of our judgements.

We also reviewed the information we held about the service. This included information shared with us by the local authority commissioners and statutory notifications. Commissioners are people who work to find appropriate care and support services which are paid for by the local authority. A statutory notification is information about important events which the provider is required to send us by law.

During our inspection visit we obtained feedback from six people who lived at Farmers Court. We spoke with three members of care staff about what it was like to work for the service and to the registered manager about their management of the service. We also received feedback from an independent advocate and another health professional, who had regular contact with people who lived at Farmers Court.

We looked at a range of records about people's care including three care files. We also looked at other records relating to people's care such as medicine records and daily logs. This was to assess whether the care people needed was being provided.

We reviewed records of the checks the registered manager/ provider made to assure themselves people received a quality service. We looked at staff records to check that safe recruitment procedures were in operation, and staff received appropriate supervision and support to continue their professional development.



Our findings

At this inspection, we found people continued to feel safe and were supported by enough staff to meet their needs. We continue to rate Safe as 'Good'.

All the people we spoke with told us they felt safe at Farmers Court and with the staff that supported them. People told us staff supported them at their scheduled call times, and were always in the building to support them if they needed any extra assistance. People also wore pendant alarms to summon staff to assist them in an emergency, which made them feel safe. One person told us, "Staff quickly came when I had an accident; I was able to press my alarm."

People were protected against the risk of abuse. Care staff told us they completed regular training in safeguarding people. Posters informing how people, staff and visitors could recognise and report safeguarding concerns were displayed around Farmers Court. Staff told us they were comfortable raising any concerns they had with the registered manager, and were confident any concerns would be investigated and responded to. Staff also understood they could report safeguarding concerns to other authorities if they felt appropriate action had not been taken.

The provider had procedures in place to report safeguarding concerns to local authorities for investigation, and to CQC. We found safeguarding concerns had been referred by the registered manager and investigated consistently. Safeguarding concerns and investigations were logged onto an electronic system that was monitored by the provider. This was so the provider could be assured that all safeguarding concerns had been investigated fully and promptly and action had been taken to keep people safe.

Staff told us and records confirmed, the provider checked the character and suitability of staff before they began work at Farmers Court. All prospective staff members had their Disclosure and Barring Service (DBS) checks and references in place. The DBS helps employers to make safer recruitment decisions by providing information about a person's criminal record and whether they are barred from working with people who use services.

Care staff attended regular infection control training and were provided with the correct personal protective equipment (PPE) such as gloves and aprons. People confirmed staff protected them from the risks of infection, by using gloves and sanitizers in their home when necessary.

Risks to people's health and wellbeing were identified, and managed safely. There were procedures to

record any accidents and incidents that occurred to show when and where they occurred, and whether risks could be mitigated to reduce them happening in the future. People had personalised risk assessments in place to instruct staff on how to manage risks in the person's home and to minimise accidents when staff supported people.

People also had up to date risk assessments and risk mitigation plans to inform staff how to manage risks to people's health. For example, where people needed assistance with their mobility, information was contained in the records about how staff should assist the person to move around, and the equipment they needed to use. One member of staff told us, "Risk assessments and plans are very clear and concise, and are always accessible."

There were sufficient staff employed by the provider to ensure people received their agreed calls at the time they should and to ensure people received safe care. There was always additional support available to people day and night, as staff remained on site at all times. In addition, the registered manager and their deputy kept their own training and skills up to date, so they could assist care staff and complete calls when needed.

The registered manager told us permanent staff were available to cover any staff absence to ensure no temporary or agency staff were needed. They had recently recruited three new members of staff to support the care team at Farmers Court. This meant they had more flexibility in the staffing group to cover weekends and sickness.

One staff member told us, "If we are short staffed, we tend to all pull together to fill the gaps. Service users get their allotted time and more if needed." One person confirmed this saying, "Staff stay with you if you need them to."

There was a system to record when staff completed their daily calls in each person's home. Staff also submitted a timesheet to the registered manager, which was audited alongside people's daily records and the call logs that were kept in their home. The information reassured the registered manager that staff arrived on time, and no calls were missed.

Staff who administered medicines received specialised training in how to administer medicines safely. They completed this training before they were able to administer medicines and had regular checks to ensure they remained competent to do so. Each person who was supported to take their medicines had a medication administration record (MAR) that documented the medicines they were prescribed. MARs were kept in people's homes so they could be completed each time medicine was given.

Some people required medicines to be administered on an "as required" basis, or at a specific time of day. There were procedures in place for the administration of these medicines to make sure safe dosages were not exceeded and people received their medicine consistently at the right time. For example, one person required nine visits each day to ensure their medicines were given at exactly the same time, in accordance with their prescription.

Our findings

At this inspection, we found staff training and induction continued to support staff to meet the needs of people at Farmers Court. We rated Effective as 'Good' at our previous inspection, we continue to rate Effective as 'Good'.

New staff members were provided with effective support when they first started work at Farmers Court. They completed an induction to the service and started working towards the Care Certificate unless they were qualified to a higher level. The Care Certificate is an identified set of standards for health and social care staff. It sets the standard for the skills, knowledge, values and behaviours expected. During the induction period staff spent time shadowing experienced colleagues to gain an understanding of how people liked their care to be provided. Staff also worked through a three month probationary period to ensure they had the right attitudes and values.

Staff told us their training was then kept up to date, and their skills were refreshed so they continued to be competent in their role. One member of staff commented, "The training is good. I feel confident to do the job."

The registered manager told us they supported staff through a system of regular meetings with their manager, and yearly appraisals. Regular meetings with staff provided an opportunity to discuss personal development and training requirements. The registered manager also operated an 'open door' policy as they had an office at Farmers Court and were available on a daily basis to support staff. One member of care staff explained, "We have regular meetings and can approach management at any time with any type of problem and a solution is usually found."

Managers worked alongside staff, so they knew people well and had a good understanding of the tasks staff needed to perform. They were therefore able to provide advice, but also to observe the practice of staff. There was an 'on call' telephone number care staff could call outside office hours to speak with a manager.

Prior to using the service, people were assessed to ensure the service could meet their needs. We saw assessments involved people and their relatives, and included discussions on each person's individual needs such as their mobility, likes and dislikes.

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. Where people lack mental capacity to make particular decisions, any decisions made must be in their best interests and in the least restrictive way 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.

Staff understood the principles of the MCA and knew they could only provide care and support to people with their consent, unless they lacked the capacity to do so. The registered manager understood their responsibilities under the MCA. They knew if people lacked the capacity to make all of their own decisions, records were required to show how decisions were reached in their best interests following a mental capacity assessment. One person told us, "Staff always ask me before performing tasks, to gain my consent."

People we spoke with managed their own healthcare appointments or relatives supported them with this. The registered manager told us the service was flexible and could support people to attend appointments if required, or could help to arrange healthcare visits. We saw people had regular daily visits from some health professionals, including the district nursing team. The registered manager explained they worked with healthcare professionals to support their care of people who lived at Farmers Court. For example, one health professional was given the use of a room at Farmers Court to enable them to support people more effectively.

People and their relatives told us staff assisted with the preparation of meals, and supported people with their nutrition if this was agreed in their care package. Staff were aware of people's dietary needs, and if there were any special arrangements regarding their nutrition. For example, staff were informed in the care records whether people were on a restricted diet, had allergies to any foods, and if they were living with a health condition such as diabetes.

In addition to supporting people in their own home, there was a communal restaurant at Farmers Court. Food was freshly prepared each day, and people could choose whether to eat in the restaurant or choose food from the menu to eat in their home. The registered manager explained this helped people to meet socially, but also provided people with nutritional support with meals.

Our findings

At this inspection, we found staff continued to be caring and engage with people. People were encouraged to maintain their independence. We continue to rate 'Caring' as Good.

People said staff were always kind to them. One person told us, "The staff are marvellous." Another person said, "The care staff are as good as gold."

An independent advocate who supported a number of people to live independently at Farmers Court told us, "The staff have always been helpful and supportive to both me and the people I support. In my opinion they have gone over and above what is expected of them."

Staff told us they enjoyed working at Farmers Court. One said, "I very much enjoy my role. I enjoy getting to know people, gaining their trust and like to think I help them to enjoy life and remain as independent as possible." Another staff member said, "I'm happy helping people live in the way they wish."

We saw an example of where one person had been helped to stay as independent as possible, by being able to continue to live in their home when their health needs had changed. Staff visited them up to nine times per day. This was with the agreed support of care staff at Farmers Court, working alongside other healthcare professionals.

People said they were involved in the planning of their care. Care planning was centred on the individual and in line with health care and other professional involvement, such as physiotherapists, occupational health and speech and language therapists. People were asked whether they had any specific cultural or religious needs during their planning, and people were also assessed to see how best staff could communicate with them.

Care records detailed what support people needed to help them communicate. For example, whether they had good eyesight, or whether they needed glasses and when these should be worn. Also information was included on people's hearing and whether they had the cognitive skills to understand questions and respond. This provided guidance to staff about how they should approach people so they understood what was happening and could engage in conversation.

Some people had sensory impairments such as some sight loss. The registered manager told us that information using alternative formats, such as braille, large print or different language options were

available for people who needed this. Information was displayed on the noticeboard in the lobby that also informed people how they could be supported to access information in different formats.

Staff and the registered manager understood the importance of promoting equality and human rights as part of a caring approach. The registered manager told us, and the PIR and records confirmed, staff training included 'equality and diversity.' Staff told us they were supported by the provider to work in a caring way, which focussed on treating people equally and in ways they would want themselves or their families to be treated

People were cared for by a consistent staff team that visited them regularly, which helped people feel secure with staff. Staff told us they felt supported in their work by the manager and other colleagues, and supported each other as a team.

Staff described how they respected people's privacy and dignity. For example, by closing curtains and doors during personal care. One staff member said, "As an example, if someone is having personal care and requires privacy during certain tasks, I would always respect that and leave the room while remaining within earshot, should they need me." One health professional who provided us with feedback said, "The support and care offered to the service users has always been done with care and dignity."

There were a number of communal areas where people could meet with friends and family. This included lounges and dining areas. People made choices about who visited them in their own home, but could also use these communal facilities.

Our findings

At this inspection, we found staff were responsive to people's requests. Care records continued to be kept up to date. Support for activities was provided according to people's agreed care packages. At our previous inspection we rated 'Responsive' as Good, at this inspection we have continued to rate 'Responsive' as Good.

People told us staff responded to their requests for assistance in a timely way, and met their personal needs and wishes. Comments from people included, "The staff do all they can for you."

One person told us how the management team had responded to people's feedback at the home saying, "People like the food now it is cooked on site, and people wanted to have a roast dinner on a Sunday. The management have now organised this in the restaurant."

Care records we reviewed contained sufficient detail to support staff to deliver person centred care in accordance with people's preferences and wishes. People told us staff wrote information about all the care they had provided in the daily records that were kept in their home. This information acted as a handover of information, so other care staff always knew what care people had received. The registered manager also explained there was a handover communication book in the staff room at Farmers Court. Staff recorded information about any changes to the service or people's health in the handover book, which staff read when they came onto their shift.

People told us communication between them and the care staff was good. Where it was included in people's care packages, staff assisted people to pursue their interests and hobbies, or go out in their local community. The provider also organised events and activities in the communal areas of Farmers Court, to assist people with developing and maintaining social relationships. For example, there were weekly groups to play scrabble and bingo, and religious services for those who wanted to follow their faith.

The people who lived at Farmers Court could also utilise the communal areas of the site to meet with family and friends, to maintain the garden, and to arrange their own community activities. The registered manager told us about how the service supported people with birthday parties and special events, which could be held within the communal areas. One person told us how they enjoyed gardening and had been involved in setting up the garden there. They said, "We have a gardener now to maintain things, but I still like to see the garden looking lovely, and to sit outside."

We found some people had end of life care arrangements in place if they chose to involve Farmers Court in their plans. The registered manager respected people's decisions to discuss these arrangements with their family, and only involve the service if they wished to. The arrangements people had in place included decisions that had been made regarding resuscitation following a cardiac arrest. The registered manager told us, "People are asked during our assessment of their care needs, and during care reviews, about any such arrangements."

People confirmed they had been given the complaints policy which was included within the information guide which was available within their homes. The provider had systems to manage complaints about the service. No one we spoke with had any complaints. A typical response was that people had no need to complain. We saw where complaints had been received at Farmers Court, these had been investigated and responded to in accordance with the complaints policy and to people's satisfaction. One health professional who provided us with feedback said, "I have no complaints regarding any staff or managers at Farmers Court."

Our findings

At this inspection, we found the service was well led. There was a management team in place that checked the quality of care people received, and acted to continuously improve the service. We previously rated Well-led as 'Requires Improvement', at this inspection we have rated Well-led as 'Good'.

People and care staff told us the service was well led by the registered manager and the management team. One person said, "[Manager] is fantastic." Another person said, "The managers are really helpful. They solve our problems."

The registered manager was supported by a part-time facilities manager, and a deputy manager. The role of deputy manager was being developed, and the provider was recruiting to two new positions for care manager roles to replace the deputy manager position. This new management structure had been introduced following staff feedback across the provider's services to increase support to staff. People told us they could give feedback to the registered manager at any time, as they were on site and operated an 'open door' policy. We saw people visited the registered manager and the facilities manager in their offices during our inspection visit, and their queries were answered straight away.

The provider and registered manager listened to the feedback people, relatives and staff gave them through regular satisfaction surveys, comments from the suggestion box in reception, and regular meetings with people to gather their views. People were also encouraged to provide feedback to staff in their regular care review meetings.

The registered manager kept people up to date with things that happened at Farmers Court by a regular monthly newsletter which was available in the communal areas of the service. We saw the newsletter updated people to changes in the service, building, or planned improvements. People were also encouraged to attend local events, and news was shared within the local community.

The provider had systems to invest in staff performance and development, to encourage learning and to increase staff retention. For example, the provider had introduced a management programme for members of the management teams at their services, which led to a Level 4 vocational qualification. In addition staff benefits had been increased with staff being offered guaranteed hours based on their working week, and an increase in salary above the minimum wage level. The provider had also achieved an accreditation for investment in people at a silver level, showing they invested in staff training and development.

The registered manager informed us they worked with other organisations to develop the best support for people at Farmers Court. Other organisations included the local police force who were working with the provider to introduce the 'Herbert Protocol' for people living with dementia. The 'Herbert Protocol' is a regional initiative to react quickly when people go missing from their homes.

The registered manager and provider also worked with local authorities to gain funding and support for initiatives to improve the lives of people living at Farmers Court. For example, the registered manager had secured funding to develop 'dementia friendly' signs and pictures to assist people to find their way around the building more easily. In addition, they had secured funding to develop part of the garden into a sensory area, providing different fragrances, textures and colours to enhance people's enjoyment, particularly where people may be living with a sensory impairment.

Systems were in place to monitor the quality of the service. The registered manager shared copies of completed audits with us, which included the provider's regular audits. We saw that actions had been identified to make improvement and timescales were given for implementation. The registered manager explained they completed checks on medication and care records, and took action to improve if needed.

Information and communication between registered managers across the provider's services was encouraged. The registered manager attended regular meetings with other managers in the group to exchange information, and to learn from each other about events that had happened at other services. This discussion forum was to assist in finding innovative ways to improve services. The registered manager also had regular quarterly meetings with the provider to keep up to date with changes and practice within the organisation.

The registered manager understood their role and their responsibilities to report issues and concerns to CQC. They kept up to date with changes in legislation and the care sector by receiving regular updates from CQC and other recognised experts in their field, for example, Dementia Friends.