

K D Burke

Freehold Cottage Residential Home

Inspection report

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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: Freehold Cottage is a residential care home that is registered to provide accommodation, care and support for up to six adults with a mental illness. At the time of this inspection, there were five people living in the home.

People's experience of using this service:

People who lived in the home benefitted from support from staff who were very caring, understanding of their individual needs and committed to providing high quality care. A staff member told us, "I just want to make sure people feel safe, respected and confident."

The ethos of the service was 'Enabling Choice' and this was clearly evidenced in the approach of all staff. People were encouraged to be as independent as possible and to make choices about the support they received.

The registered manager and staff worked in collaboration with community based mental health professionals to ensure people received safe and effective care. People were supported to take positive risks as appropriate to help improve their quality of life.

The service met the characteristics for a rating of good in all the key questions we inspected. Therefore, our overall rating for the service after this inspection remains good.

Rating at last inspection: Good. (Report published 6 August 2016).

Why we inspected: This was a planned inspection to check that this service remained good.

Follow up: We will continue to monitor this service and plan to inspect in line with our re-inspection schedule for those services rated good or sooner if we receive information of concern.

For more details, please see the full report which is on the CQC website at 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 remains good.

Good ●

Is the service effective?

The service remains good.

Good ●

Is the service caring?

The service remains caring.

Good ●

Is the service responsive?

The service remains responsive.

Good ●

Is the service well-led?

The service remains well-led.

Good ●

Freehold Cottage Residential Home

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. 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 was carried out by one adult social care inspector.

Service and service type:

Freehold Cottage is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. The care home is a detached property which accommodates up to six adults with mental illness.

The service had a manager 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 24 hours' notice of the inspection visit because it is small and people were often out accessing the community. We needed to be sure people who lived in the home and staff would be available to speak with us.

What we did:

Before the inspection:

Our inspection plan took into account information the provider had sent to us including 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 also considered information about incidents the provider must notify us about, such as abuse or serious injuries.

We requested information from the Lancashire County Council contract management team and infection prevention team as well as Healthwatch Lancashire. Healthwatch Lancashire is an independent organisation which ensures that people's views and experiences are heard by those who run, plan and regulate health and social care services in Lancashire.

We used all the information gathered to plan our inspection.

During the inspection:

We were only able to speak in depth with one person who lived in the home. However, we also spoke more generally with a further three people. We also spoke with the registered manager, the service manager, two support workers and two visiting healthcare professionals.

We reviewed the care and medicines records for two people who lived in the home, three staff personnel files, audits and other records about the management of the service.

We requested additional evidence to be sent to us after our inspection, including the staff training matrix and the policy relating to the provider's duty of candour. This evidence was received and the information was used as part of our inspection.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems and processes in place to help protect people from the risk of abuse.
- Staff had completed safeguarding training and could tell us the correct action to take if they witnessed or suspected abuse. Policies and procedures were in place to guide staff.
- People told us they felt safe in the home and staff treated them well. One person commented, "I feel safe. I like living here."

Assessing risk, safety monitoring and management

- Staff ensured risks to people were assessed and managed appropriately.
- People's care records contained comprehensive and individualised risk assessments which were regularly reviewed and updated.
- Strategies were in place to support people to take positive risks.
- Staff completed regular checks to ensure the safety of the premises and equipment used in the home. Procedures were in place to ensure people would be evacuated safely in the event of an emergency at the home.
- Staff carried out daily checks to ensure that monies held for people were safely managed and accounted for.

Staffing and recruitment

- The provider had safe recruitment processes in place. However, the service had not always ensured checks with the Disclosure and Barring Service (DBS) had always been undertaken in line with the timescales contained in CQC guidance. We found this had not had a negative impact on the care people received. We raised this with the registered manager who took immediate action to rectify the situation. People told us they had no concerns about the staff who supported them.
- People told us there were always sufficient staff on duty to provide them with the support they wanted and needed. One person told us, "They are always around if I need them." We noted that the service had recently increased the numbers of staff on duty at night following a deterioration in one person's mental health.
- The registered manager told us the service's recruitment policy positively encouraged applications from people who had experienced mental health issues. Any necessary adjustments and support were provided to enable staff to work effectively.

Using medicines safely

- Medicines were safely managed. People told us staff always ensured they took their medicines as prescribed.
- Staff had received training regarding the safe handling of medicines.
- Staff carried out regular checks of the stock of medicines held for people; this helped to ensure people had

been given their medicines as prescribed.

- Although the registered manager completed regular spot checks of staff performance, these were not specifically in relation to the administration of medicines. The registered manager told us they would introduce a competence assessment tool specifically to check the safe handling of medicines by staff.

Preventing and controlling infection

- The service protected people from the risks of infection.
- The home was clean and free from malodour. People who lived in the home were supported by staff to keep the environment clean.
- Staff had completed training in how to manage the risk of cross infection. Staff used personal protective equipment when supporting people with personal care.

Learning lessons when things go wrong

- The service had systems to make improvements when things went wrong.
- The registered manager told us staff meetings and supervision sessions were used to discuss any incidents or concerns relating to the care people received; these discussions helped to ensure measures were put in place to help prevent further incidents from occurring.

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

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

- Staff assessed people's needs and preferences and care was planned based on this information.
- The registered manager told us information was gathered from professionals involved in a person's care before a decision was taken whether the home was able to meet the individual's needs. We saw detailed plans had been put in place to support people when transitioning from hospital or other care settings to Freehold Cottage; this helped to ensure people were familiar with the environment and other people who lived in the home before they moved in. A professional involved in this transition process had commented, "The quality of the service has been excellent. A very in-depth care plan was provided prior to the person moving in which was tailored to their individual needs."
- People's care records included detailed information about their care needs and their preferences in relation to the support they received.

Staff support: induction, training, skills and experience

- Systems were in place to ensure staff had the training and skills necessary to provide effective care
- Staff told us they had received a comprehensive induction when they started work at the home which had prepared them well for their role. The registered manager told us people who lived in the home were asked to provide feedback about new staff to help ensure they felt comfortable being supported by them.
- Staff had completed training to help ensure they were able to provide effective care. Although staff we spoke with told us they had not completed face to face first aid training, we saw that two places had been secured on the CPR training to be delivered on 27 March 2019 at the home's sister company. This would help to ensure staff understood the correct action to take in the event a person in the home required resuscitation.
- The registered manager provided staff with regular supervision. This provided them with an opportunity to discuss any concerns relating to people who used the service and to identify training needs. We noted the registered manager used supervision to provide positive feedback to staff on their performance.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation

of Liberty Safeguards (DoLS).

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 registered manager had completed the necessary DoLS applications when people were unable to consent to their care arrangements in the home. At the time of this inspection, two people had DoLS authorisations in place. We saw evidence that the necessary action had been taken to ensure any conditions included in the authorisations were met.
- Staff had a good understanding of the MCA and the need to seek consent from people when providing care and support. Although two people were subject to some restrictions in their best interests, we observed that they were still supported to make choices about the care they received.

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

- People were supported to eat a varied and nutritious diet based on their individual preferences.
- Staff supported people to make their own breakfasts and lunches, with the evening meal being cooked by staff. During the inspection we saw that people were encouraged to take part in preparing to cook this meal.
- Two people had restrictions in place to help ensure they had a healthy diet; these were assessed as being in each individual's best interests and appropriately authorised under DoLS

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

- The service worked in partnership with community based mental health professionals and other healthcare professionals to ensure people received effective care. Records showed one professional had commented, "The registered manager is good at using all appropriate services to ensure people's needs are met."

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

- The provider had made improvements to the home since the last inspection, including the refurbishment of the bathroom and the installation of a new shower room. This should help people remain independent with their personal care should they be unable to use the bath.

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

- The registered manager told us they were proud of the fact that the service had been successful in supporting people to achieve outcomes that were important to them. They gave us examples of the progress people had made and how this had improved their quality of life.
- People's care records showed that staff were proactive in contacting health professionals if they had any concerns about people's mental or physical health.

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

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

- We observed caring and respectful interactions between staff and people who lived in the home. The atmosphere was relaxed and we heard people laughing and singing. The registered manager told us they understood the value of music in promoting a sense of well-being in people.
- Staff told us they understood the importance of meeting people's diverse needs, including those relating to cultural and religious beliefs. One staff member commented, "Staff treat people as individuals and care for them according to their needs."

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

- We observed staff supported people to make choices about their day to day care. People completed a 'How am I doing' form every six months. This enabled them to express their views about the progress they had made and any changes they wanted to make to their support to help them achieve their goals.
- People were able to express their views during day to day conversation, meetings and satisfaction surveys. Regular residents' meetings helped keep people informed of proposed events and gave them the opportunity to be consulted and make suggestions.
- Where necessary, the registered manager sought external professional help to support decision-making for people, including the use of advocacy services. People can use advocacy services when they do not have friends or relatives to support them or want help from someone other than staff, friends or family members to understand their rights and express their views.

Respecting and promoting people's privacy, dignity and independence

- Staff were committed to ensuring people's rights were upheld and that they were not discriminated against in any way.
- All staff were of the view that they were guests in people's home and should respect their rights to privacy. People could keep their bedrooms locked and personalise their own space.
- Staff encouraged people to be as independent as possible, both within the home and in accessing the local community. A professional involved in a person's care had commented, "People are well supported and work towards recovery goals to enable them to be as independent as possible."
- People's personal information was stored confidentially. The registered manager had taken the necessary action to ensure the service was compliant with data protection regulations.

Is the service responsive?

Our findings

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

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 needs were identified, including those related to protected equality characteristics such as age, disability, ethnicity and gender, and their choices and preferences were regularly reviewed.
- There were documented crisis plans in place for staff to follow should individuals experience a deterioration in their mental health.
- We saw positive feedback from external professionals and relatives regarding the responsive nature of the service. Comments made included, "Freehold Cottage has been the most responsive provider out of all other residential care homes to meet [name of person's] needs" and "The level of care has been fantastic from start to finish."
- People were encouraged to participate in activities both on an individual and group basis. The registered manager told us one of the main achievements of the service since the last inspection was supporting people to plan and take holidays on an individual basis. They told us, "We want people to enjoy their life." One person told us how they had recently returned from a holiday supported by one staff member and had enjoyed the experience. They were already considering where they would visit next.

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place and information on display to advise people on how to raise any concerns. There had not been any complaints received since the last inspection. However, we saw the registered manager had responded promptly to address concerns raised by a relative in a satisfaction survey.
- People told us they would feel confident to discuss any concerns with staff or the registered manager and considered they would be listened to and taken seriously.

End of life care and support

- The service had processes in place to document people's end of life wishes. The registered manager told us how they had supported a person to access legal advice to enable them to put a will in place; this would help to ensure their wishes were respected after their death.
- At the time of the inspection, the service was not caring for anyone who was at the end of their life. However, all staff had completed training in death and bereavement. They were also aware of cultural requirements which would need to be met at the time of death for some people who lived in the home.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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 ethos of the service was 'Enabling Choice' and we saw this approach implemented by staff throughout the inspection.
- We saw the registered manager had an 'open door' policy. During the inspection, we observed that people who lived in Freehold Cottage chose to spend time in the registered manager's office and clearly felt comfortable in their presence.
- Staff demonstrated a commitment to providing high quality, person-centred care. They told us they would be confident for a relative to live in the home.
- Staff told us they enjoyed working in the home and felt treated fairly by the registered manager and colleagues.
- Although there had not been any accidents or incidents in the home, there was a duty of candour policy in place. This provided guidance for staff to follow where necessary to ensure transparent communication with people who lived in the home and their relatives as appropriate.

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

- Staff told us they were clear about their role in the home. They also said that they could always access advice and support out of office hours from the registered manager or by contacting the on-call manager for the home's sister company.
- External professionals had provided positive feedback about the way the service was run. One person had commented, "[Name of registered manager] is knowledgeable and competent in ensuring people's needs are met."
- The registered manager had ensured all required notifications had been submitted to CQC. We saw the legal requirement to display the rating from the last inspection on the website and in the home had been met.

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

- The registered manager was proud of the culture of the service. They told us, "We are all equal here. There is nothing to say we are a [care] home and people who live here are very much part of the community."
- The service had policies and procedures in place to guide staff to provide person-centred, individualised care. 'Easy Read' versions of important policies were also available to help people who lived in the home understand their rights and the support they could expect to receive.

- The registered manager held regular staff meetings; these were used to share important information with the staff team and to alert them to any changes in the service. Staff told us they valued these meetings and could always make any suggestions or comments about how the service could be improved.
- Since the last inspection, the home had received the both the Investors in People (IIP) standard and Health and Wellbeing Award. The IIP report supporting these awards highlighted the organisation demonstrated strong leadership as well as effective consultation and empowerment. The report also stated the organisation's approach to the health and wellbeing of staff was effective and staff felt a sense of worth and value. The report included the comment, 'People are encouraged to take ownership and responsibility by being involved in decision making and are given relevant information about health and wellbeing'.

Continuous learning and improving care

- The registered manager demonstrated a commitment to continuous service improvement. They were a member of a local registered managers forum which enabled people to share best practice.
- The service used a system of audits to help ensure the quality and safety of the service. Where necessary, the registered manager took action to make improvements.

Working in partnership with others

- The registered manager and staff worked in close collaboration with the community based mental health professionals who were jointly responsible for people's care. We saw the registered manager had taken the necessary action to update an individual's care coordinator about their increased level of risk. This had enabled appropriate management plans to be put in place to ensure the safety of the individual concerned as well as other people who lived in the home.