

Leisure Care Homes Limited

# Frampton House Residential Care Home

## Inspection report

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## Ratings

Is the service well-led?

**Requires improvement**



## Overall summary

We carried out an unannounced comprehensive inspection of this service on 15 October 2014 and found that there was a breach of legal requirements. The service was not consistently well led because the registered persons did not operate reliable systems to monitor the quality of the service provided. This is necessary so that shortfalls can quickly be corrected.

We completed an unannounced focused inspection carried out on 7 July 2015. This inspection was undertaken to make sure that improvements had been made and that the breach of legal requirements had been addressed.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Frampton House Residential Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

There was 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.

Frampton House Residential Care Home provides accommodation for up to 30 people who need personal care. The service provides care for older people some of whom live with dementia.

There were 28 people living in the service at the time of our inspection.

At this inspection we found that the registered persons had followed their action plan that they had told us would be completed by the 1 May 2015. This action plan had enabled the registered persons to meet legal requirements.

We found that the registered persons had regularly completed robust quality checks. These checks helped to

## Summary of findings

ensure people reliably and safely received all of the care they needed. This included making sure that people had enough to eat and drink in order to promote their good health. In addition, checks had been completed to ensure that staff received relevant training and that new staff

could demonstrate their previous good conduct before being appointed. Quality checks had also ensured that fire safety equipment and procedures provided people with a high level of protection.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service well-led?**

We found that action had been taken to improve the way in which the service was managed and led. This was because the registered persons had regularly completed robust quality checks that helped to ensure people reliably received all of the care they needed.

This meant that the registered persons were now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question. This is because we require a longer term track record of consistent good practice in order to improve the rating to 'Good'.

We will review our rating for well-led at the next comprehensive inspection.

**Requires improvement**



# Frampton House Residential Care Home

## 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 registered persons were meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

We completed an unannounced focused inspection of Frampton House Residential Care Home on 7 July 2015. This inspection was undertaken to check that improvements to meet legal requirements planned by the registered persons after our comprehensive inspection 15 October 2014 had been made. We inspected the service against one of the five questions we ask about services: Is the service well led? This was because the service was not meeting legal requirements in relation to that question.

Before our inspection we reviewed the information we held about the service. We reviewed notifications of incidents that the registered persons had sent us since the last inspection. In addition, we contacted local commissioners of the service to obtain their views about how well the service was meeting people's needs.

The inspection team consisted of a single inspector.

During the inspection we spoke with five people who lived in the service and two relatives. We also spoke with three care workers, two senior care workers, the chef, the deputy manager and the registered manager. We observed care being provided in communal areas and looked at the care records for four people who needed extra assistance to eat and drink enough. In addition, we looked at records that related to how the service was managed including the recruitment and training of staff and the operation of the fire safety system.

# Is the service well-led?

## Our findings

At our comprehensive inspection on 15 October 2014 we found that the registered persons had not regularly completed robust quality checks. These checks were necessary to ensure that people reliably and safely received all of the care they needed. As a result of this, problems in the running of the service had not been quickly identified and resolved. These shortfalls included some of the arrangements used to support people to eat and drink enough to promote their good health. There had also been oversights when recruiting some staff because they had not been required to clearly demonstrate their previous good conduct before they were appointed. In addition, some staff had not received all training that the registered persons said they needed in order to be able to care for people in the right way. We also noted that quality checks had not effectively ensured that fire safety equipment and procedures provided people with a high level of fire safety protection.

This was a breach of the Regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

At this inspection we found that the registered persons had followed the action plan they had prepared. The improvements they had introduced had met the requirements of Regulation 10 we have described above.

Records showed that the registered persons had regularly completed a number of robust quality checks. These checks included reviewing key parts of the arrangements used to support people to eat and drink enough to promote their good health. For example, checks had been made to ensure that staff were keeping a detailed record of how much some people were eating and drinking. This was necessary to make sure that they had enough nutrition and hydration.

In addition, quality checks had been completed to show that people had been offered the opportunity to have their body weight checked. This was necessary to identify any significant changes that might need to be referred to a healthcare professional. Records showed that healthcare professionals had been consulted about some people who had a low body weight. This had resulted in them being given food supplements that increased their calorie intake.

Records showed that the arrangements made to support people at meal times had been evaluated to make sure they were effective. This included ensuring that staff gave individual assistance to some people to eat their meals. In addition, checks had confirmed that when necessary food and drinks were being specially prepared so that they were easier to swallow without the risk of choking.

Other quality checks had been completed to ensure that staff had the knowledge and skills they needed to care for people in the right way. This included making sure that staff received the training that the registered persons said they needed. Records showed that staff had received training in key subjects such as how to safely assist people who had reduced mobility or who needed extra support to eat and drink enough. We found that staff had the competencies they needed to care for people in a safe and responsive way.

The registered persons had also introduced a more robust system to ensure that comprehensive recruitment checks were correctly completed. These quality checks had ensured that staff had been required to show they did not have criminal convictions and had not been guilty of professional misconduct. In addition, other assurances had been obtained including obtaining references from previous employers. These recruitment checks helped to ensure that new staff could demonstrate their previous good conduct and were suitable people to be employed in the service.

Records showed that the registered persons had improved the way in which checks were made of the operation of the fire safety system. There was equipment in place to quickly identify a fire safety emergency so that people could be kept safe. This equipment had been regularly checked to make sure that it remained in good working order. In addition, staff had received practical training so that they could correctly follow the procedures necessary for effectively responding to a fire safety event.

All of the improvements that had been made in the completion of quality checks had helped to ensure that people who lived in the service received the care they needed in a safe setting.