

# Ability Housing Association Fiddlers Green

## 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

This inspection took place on 8 February 2018. Our visit was unannounced. This meant the service did not know we would be visiting.

Fiddlers Green is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. There were seven people using the service at the time of our visit.

The last inspection of Fiddlers Green took place in February 2017 when we found three breaches of Regulations relating to training, quality assurance and making required notifications to CQC. After the inspection, the provider wrote to us to say what they would do to meet the legal requirements.

At this inspection we found the provider had followed their action plan and improvements had been made in the required areas.

The home had a registered manager in post. 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Throughout this report people who use the service are referred to as clients in line with their preferences.

Clients told us they liked living at Fiddlers Green and said staff were kind and caring towards them. There was a relaxed friendly and homely atmosphere when we visited.

Clients received care and support from a long standing group of staff who knew them well and understood their needs and preferences. Each client had individualised support plans to make sure they received the support they required. The service was responsive to client's changing needs and linked well with external health professionals to help ensure positive outcomes for each client.

Staff were trained and well supported in their job roles. Staff members had been safely recruited and had received an induction to the service. They had received training around safeguarding vulnerable people and knew what action to take if they had or received a concern.

Clients were supported to have their health needs met. We saw that their prescribed medicines were being stored securely and managed safely.

The registered manager supported staff to deliver appropriate care and support. Staff attended regular training which gave them the knowledge and skills to support clients effectively. Staff had received training

in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

There were improved systems in place to monitor the safety and quality of the service and drive improvement where required.

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

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Any risks to individual safety and welfare were being identified and managed appropriately.

Clients were supported to take their medicines safely.

There were appropriate numbers of care staff allocated to help keep clients safe.

Robust recruitment procedures were in place to help keep clients safe.

### Is the service effective?

Good ●

The service was effective.

Staff were up to date with their training requirements and had the knowledge and skills to meet client's needs.

The service complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

Staff supported clients to access healthcare services to help make sure their physical and mental health needs were met.

Clients were protected from the risk of poor nutrition and hydration.

### Is the service caring?

Good ●

The service was caring.

Clients were supported by staff who were caring, kind and respectful. Their dignity and right to privacy was upheld by the staff.

Relationships between staff and clients receiving support were positive. Staff knew clients well and provided care and support in line with their wishes and preferences.

### Is the service responsive?

Good ●

The service was responsive.

Managers and staff knew clients well and responded promptly to any changes in their care and support needs.

Arrangements were in place for dealing with concerns and complaints.

Clients said that the service involved them and listened to them.

### Is the service well-led?

Good ●

The service was well led.

Staff were well supported by a registered manager who was approachable and listened to their views. The ethos of the service was positive and staff felt part of a team.

The safety and quality of the service was monitored and involved health professionals kept up to date with any changes or events.

# Fiddlers Green

## **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.

Prior to our visit we reviewed the information we held about the service. This included inspection history, any safeguarding or complaints and notifications that the provider had sent to CQC. Notifications are information about important events which the service is required to tell us about by law.

We visited the home on the 8 February 2018. Our visit was unannounced and the inspection was carried out by one inspector.

We spoke with seven clients, the registered manager, the nominated individual and four members of staff. We also received written feedback from one relative and one external health professional.

We looked at records about care, including two files of clients using the service. We checked two staff files and the records kept for staff allocation, training and supervision. We looked around the premises and at records for the management of the service including health and safety records. We also checked how medicines were managed and the records relating to this.

# Is the service safe?

## Our findings

Clients told us that they liked living at Fiddlers Green and felt safe there. One client told us, "Yes I feel safe." Another client said, "They do their best for everybody." A third client commented, "It's nice."

A relative commented, "[Client's name] is clearly much happier at Fiddlers Green. They are engaged with and engage with staff and fellow residents much more."

Clients told us there were usually enough staff on duty to meet their needs. Some clients using the service talked about the difficulty the service had in getting permanent staff and this could sometimes affect the support provided. One client using the service said, "We do have a few agency. You get good, you get bad. I'm being fair." They went on to say, "The manager does ask what we think of them. They always try to get the same people." Another client commented, "There's enough around." A third client told us, "We would like to get more staff. We need more [permanent] staff."

Staff told us that they felt the staffing levels were safe. The registered manager told us that recruiting permanent staff for the service was an on-going challenge. They said the service used temporary agency staff to cover vacant shifts and tried to use consistent people wherever possible so clients using the service got to know them and vice-versa. A staff member said, "We do need more staff. They are trying to recruit. It's a general issue around here." Another staff member commented, "There are problems with recruitment. They do everything possible to get permanent staff." A third staff member told us, "There is always a minimum of two staff. We always meet client's basic needs."

Recruitment procedures made sure that the right staff were recruited to support clients to stay safe. The electronic files seen included references from previous employers and proof of identity documentation. Criminal Records checks had been completed. These important checks identify people who are barred from working with children and vulnerable adults and informs the service provider of any previous criminal convictions.

There were clear policies and procedures for the safe handling and administration of medicines. Medicines were securely stored and records of administration were up to date and accurate. Regular audits were carried out to make sure client's medicines were being stored and administered safely. Staff were trained in safely administering medicines and had their competency assessed by senior staff.

Any concerns about client's safety were identified or addressed. Information about potential risks to clients and their safety was available in care files. For example, risk assessments addressed areas of daily living such as self-neglect, taking medicines, fire safety and handling money. Care plans also gave information about how to help clients stay safe. We saw this care documentation was kept up to date and reviewed following any incidents or changes in the client's needs.

Clients using the service felt comfortable in raising concerns about their own safety and the support they received. One client said, "I'd be the first to say. I'm no doormat." Staff knew how to recognise the signs of

possible abuse. Training records showed that staff had completed safeguarding training and staff we spoke with confirmed this. They felt confident that senior staff would take appropriate action to keep the clients living at Fiddlers Green safe. One staff member told us, "The manager and senior are always there for you. I feel able to approach them." At the time of our inspection there were no on-going safeguarding investigations.

The service managed the control and prevention of infection well. Staff were trained and understood their role and responsibilities, for example, around food safety. The house was clean and well maintained when we visited. New risk assessments and systems had recently been put in place by the registered manager.

We saw regular checks took place to help keep clients safe, for example, of fire safety equipment. Certificates showed that equipment in use was serviced as required. For example, electrical equipment was checked as required. One client told us that they were having their wheelchair serviced on the day we visited. They told us about other adaptations being planned to help them stay safe whilst maximising their independence.



# Is the service effective?

## Our findings

Clients spoken with were happy with the support provided by the staff working at Fiddlers Green. One client said, "Lovely, they do anything you want." Another client said, "I like it here. It's my home."

A relative told us that they were happy with the service provided to their family member saying, "The support and care that [client's name] receives at Fiddlers Green is infinitely better and better-suited to their needs and personality than they have ever previously received." An external health professional commented, "Permanent staff know the clients well and respond to their needs."

At our last comprehensive inspection of the service in February 2017 we found the service to be in breach of the regulations. This was because they did not have suitable arrangements in place to ensure that staff received appropriate training to carry out their duties. During this inspection we found the provider had made the necessary improvements to meet legal requirements.

There was an established core team of staff working at the service who were appropriately trained. Staff told us they had good opportunities for on-going training and there was a system to make sure staff received relevant mandatory training and that this was kept up to date. Records showed that staff had undertaken either online or classroom training across a number of areas including safeguarding adults, nutrition, health and safety and moving and handling.

New staff undertook induction training and shadowed more experienced staff until they felt confident in their roles. New starters attended a four day organisational induction and then a tailored familiarisation programme for the home. The organisation had also started to implement the Care Certificate as part of their training for staff. This is a set of standards that have been developed for support workers to demonstrate that they have gained the knowledge, skills and attitudes needed to provide high quality and compassionate care and support.

Staff told us they could access the training and support they required. Systems were in place so senior managers could monitor staff training to make sure all staff kept up to date. One staff member said, "I've done a lot. Lots of e-learning and classroom training." Another staff told us about the level 3 Qualifications and Credit Framework (QCF) diploma they were completing. Staff confirmed they were supported by their line managers through regular staff meetings, one to one supervision meetings and annual appraisals. We saw records to support this.

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 when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

The registered manager understood their responsibility for making sure the least restrictive options were always considered when supporting clients and ensuring clients were not unduly or unlawfully restricted. The manager had submitted DoLS applications for authorisation where a client's liberty had been restricted in the service. Capacity assessments, best interest decisions and DoLS applications and authorisations were recorded. Records of best interest decisions were kept on file, for example, about medical treatment.

Staff completed MCA and DoLS training that helped them to understand issues around capacity and support client effectively. Throughout our inspection staff offered client choices and supported them to make decisions about what they wanted to do. Staff we spoke with were aware of the need to always work in their best interests. One staff member said, "We always work in people's best interests. We try to involve them in everything." Another staff member told us, "We try to engage with people as much as we can." Support plans reflected people's strengths and things they could do independently.

Clients had their own bedrooms and these were personalised. For example, where clients had particular interests these were evident in their choice of décor and furnishings. The communal areas were clean, comfortable and homely. The environment was adapted to support clients with their physical needs.

Clients told us they enjoyed the meals provided to them and could choose what they wanted to eat. People ate their main cooked meal at their day placement during the week and told us they enjoyed a brunch at home on Saturday and a roast on Sunday. One client told us, "They come around at the weekend to ask what we wanted." Another client said, "You can eat the things you like." A third client commented, "The food is alright."

Client's nutritional needs, including any allergies, preferences and special dietary needs were recorded and met. This information was easily accessible to staff and regularly reviewed and updated. We saw guidelines were available for one client and staff we spoke to were aware of these.

Client's health needs were met. Records showed that clients had regular access to their GP, opticians, dentists and other healthcare professionals as needed. Each person had a health action plan. An external health professional said that the service was effective in working with local health teams "to ensure the health needs are responded to appropriately, including moving and handling issues and speech and language therapy issues."

## Is the service caring?

### Our findings

Clients told us they liked living at the service and said that staff were kind and caring. One client said, "They treat me nicely." Another client commented, "The staff are very nice." A third client told us, "It's nice. The staff are kind."

A relative told us, "The attention [the client] receives at Fiddlers Green supports them being themselves." An external care professional commented, "Overall I think the care seems to be good."

The majority of clients using the service at Fiddlers Green had lived there for an extended period and were supported by a consistent core group of staff, some also long standing who knew them very well. Staff we spoke with were familiar with the needs and preferred daily routines of each client. One client said, "It's the best. I would not live anywhere else."

There was a relaxed and homely atmosphere in the house when we visited. Observed interactions between staff and clients using the service were familiar and friendly. Jokes were shared and staff clearly knew how to work positively with each client to help ensure their wellbeing. One staff member told us, "It's good care. The staff genuinely care here – that shines through." Another staff member said, "There are really lovely people who work here. A lot of dedication." A third staff member commented, "They know us and we know them."

Staff gave us examples of how they supported the privacy and dignity of clients using the service. For example, knocking on doors, ensuring the client had control of their space and had privacy when they wanted it. One staff member said, "Support is always behind closed doors. We always knock. We always ask permission." Another staff member commented, "No-one is disrespected here. Not the clients, not the staff."

Person centred support plans gave information about what clients were like, their strengths and the things that were important to them. Pictures and photographs were used to illustrate the plans and each gave good information about how each client liked to be supported. Clients were supported to develop independent living skills and to achieve goals. An external health professional commented, "The clients living at Fiddlers Green are encouraged to do as much for themselves as possible. The clients who I know very well clearly find this empowering."

Information about each client was stored securely and confidentially. Clients had been asked to consent when information had to be shared with others, for example, with healthcare professionals. The staff knocked on bedroom doors and waited for an answer before entering rooms. The staff did not discuss client's needs in front of others. For example, they made sure the office door was shut when sharing information about clients.

A staff photo board was displayed giving clients information about who was working with them each day.

## Is the service responsive?

### Our findings

Staff talked knowledgeably about client's interests and how they supported them to be active. Care records reviewed documented the day to day activities of clients using the service included attending day centres and clubs, going to Church and on shopping trips with staff. We saw clients were supported to keep in touch with people who were important to them such as their family.

Clients told us that the service supported them to go to day centres, engage in activities and be part of the wider community. Both clients and staff acknowledged the difficulty the service had in getting permanent staff and this could sometimes affect the support provided, particularly when supporting people outside of the home. One client said, "I go swimming. I went out shopping to Kingston recently." Another client told us, "I would like to get out more. We need to get more staff."

Each client had an allocated key worker who monitored their wellbeing and took responsibility for ensuring their care and support needs were being met. One client told us, "My key worker helps me. We just got some new shoes." Clients were involved in setting their own goals to achieve based around their personal interests and life skills they wished to learn. The goals were regularly reviewed by the client and their key worker to make sure they were getting the support they needed. One staff member told us about their recent goal planning session with a client including arranging an annual holiday for them. Records seen reflected this support.

Client's support plans addressed their cultural and religious needs. One person told us that they went to Church independently and others told us that they were supported by staff to attend their place of worship.

We saw that care documentation was kept under review and updated regularly. One person told us, "We have a review and talk about my care plan." Support plans seen were detailed and person centred addressing client's abilities, routines and preferences, emphasising what they could do for themselves. They contained guidance for staff profiling each client's care needs across a range of documents including their personal details, daily routines and personal care support. Any individual issues such as specialist health needs were documented in the support plan with guidance on how to support the client consistently.

Information was shared by staff through daily notes, verbal handovers and team meetings. Daily notes were completed for each client including their activities, wellbeing and if there was any change to their needs that staff needed to be aware of. Staff handovers were used to share information about changes in client's needs. We saw team meetings were also used to discuss client's individual needs and staff signed to say they had read the minutes.

The service had a procedure in place to manage any concerns or complaints which was accessible to clients, their relatives and other involved stakeholders. Clients told us they felt able to talk to a member of staff or the registered manager if they had a concern or complaint. One client told us, "I always tell the staff if I am not happy." Another client said, "I can talk to the manager." A third client commented, "I'd talk to one of the staff."

# Is the service well-led?

## Our findings

At our last comprehensive inspection of the service in February 2017 we found the service to be in breach of the regulations. This was because they had not made statutory notifications to CQC as required by the regulations and did not have sufficiently robust procedures to monitor and review the quality of the service. During this inspection we found the provider had made the necessary improvements to meet legal requirements.

Clients using the service and staff spoke positively about the registered manager and senior staff, saying that they were visible and approachable. They said they liked living at Fiddlers Green and felt their needs were met. One client told us, "This is my home. It's the Rolls Royce of services." Another person commented, "It's very good." A third person said, "The manager is very nice."

A relative said, "My interaction, and that of other family members, with all at Fiddlers Green is positive and open." An external health professional said, "Issues that are raised with management are dealt with promptly."

Staff were confident about the quality of care provided. They felt valued and appreciated for the work they did by the management team. They said that the registered manager had an open door policy and they could talk to her or the senior staff any time they wanted to. One staff member said, "She'll stop and talk to you." Another staff member said, "She puts the clients first."

Regular staff meetings were held that enabled staff to discuss issues and keep up to date with current practice. Minutes seen included discussion around areas such as health and safety, training and supporting clients with their individual needs. One staff member told us, "Any issues are discussed at our meetings."

The core values and behaviours of the organisation were displayed within the service and embedded through staff training and on-going conversations in staff meetings and supervision. These included the emphasis on ability and not disability along with ensuring the integrity of staff working within services.

Records were well maintained, clear and up to date. Care records reflected client's views and preferences. Information was easy to read and client's care and support needs were fully documented. The staff reviewed and updated these records regularly and kept an accurate and appropriately detailed record of the support they had provided.

The organisation had systems to regularly audit and update information. Scheduled audits were carried out to monitor the quality of the service and to identify how the service could be improved. The manager and staff carried out checks on areas such as the medicines, the environment, infection control, health and safety and of care records. For example, care files we looked at had evidence of audits to make sure the information was up to date.

A new organisational quality assurance strategy had been put in place with weekly returns being made by

each service across areas and a compliance register being maintained. Any areas for improvement were identified for action and subsequent review within service improvement plans. Regular quality monitoring and peer audits were scheduled for each service.

Clients and their relatives or representatives were asked to complete annual satisfaction surveys about their experiences. Feedback seen from the December 2017 survey of clients using the service was very positive. Comments made by relatives or representatives included, "The staff are excellent and are brilliant with all they do" and "They care for and support people very well." Any actions required from the survey results had been identified with clear actions put in place.