

D & L Support Ltd

Foxmount

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

Foxmount is a 'care home'. Foxmount primarily supports people who express themselves through their behaviour, with learning disabilities, autism and mental health conditions. The service can accommodate up to five people in one adapted building.

There were two people living at Foxmount at the time of the inspection, each of which had an individually adapted flat. The first floor of the building has been designed to accommodate people who wish to come to Foxmount for respite.

People's experience of using this service and what we found

People were supported to live safely in their homes within the community.

Staff understood people's needs and how to assist them to protect them from avoidable harm. Care plans and risk assessments were in place, which provided staff with guidance on how to meet people's needs and manage identified risks.

People were supported to receive their medicines safely and as prescribed.

The service had infection control processes and systems in place to reduce the risk of people contracting COVID-19.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support: The provider had developed a model of care and an environment that maximised people's choice, control and independence.

Right care: People's care was planned and delivered with their individualised needs in plans. We saw many examples of how people's care promoted their dignity, privacy and human rights.

Right culture: We saw how the vision, values, attitudes and behaviours of the registered manager and care

staff supported people to be confident and empowered in living in the community.

People received care and support from a consistent staffing team which had been trained and supported to meet their needs. The care was personalised and the service was responsive to the needs of the people.

We received positive feedback from staff, relatives and professionals regarding the leadership in the home.

There was a quality assurance system in place to ensure people received the best possible service. The registered manager worked closely with partner agencies and services to promote best practice within the service and make a positive impact to people's lives.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

This service was registered with us on 26 February 2021 and this is the first inspection.

Why we inspected

We carried out an announced comprehensive inspection of this service on 11 March 2022. This was a planned inspection based on the service being newly registered. We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last inspection, by selecting the 'all reports' link Upton Mill Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Foxmount

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Foxmount 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.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We reviewed information we had received about the service. This included notifications about important events at the service and feedback shared directly with CQC. We used all this information to plan our inspection. We sought feedback from the local authority.

During the inspection

We observed staff interacting with people and looked at the premises. We spoke with four members of staff including the registered manager and three care staff. We observed the two people who use the service. We also spoke to the one person's independent visitor. We reviewed a range of records. This included two people's care records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including audits and safety checks were reviewed.

After the inspection

We spoke with two people's relatives. We also spoke to three staff members and one professional who works closely with the service. We reviewed the evidence sent by the provider electronically. This included the service's staff training and support data, records related to medicines, policies and procedures, feedback from professionals and other information related to the service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had policies and procedures in place to respond and safeguard people from abuse.
- People were protected from the risk of abuse by staff who had the knowledge and understanding of the provider's safeguarding policies and procedures. Staff described the arrangements for reporting any concerns relating to people using the service and were confident to do this.
- One person's representative told us they feel safe living at Foxmount. People's relatives offered positive feedback about people's safety. One family member told us that their relative appears calm, settled and trusts the staff supporting them.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and actions needed to mitigate risk were available for staff to refer to. This included how to support people with risks associated with anxious behaviours, going out in the community and risks associated with the use of physical intervention.
- Staff were aware of people's risks and the support they needed to remain safe. We observed staff supporting people in their environment safely.
- Environmental risks to people were managed safely. Risk assessments and safety checks had been carried out to reduce the risk of fire and legionella.
- Monthly fire evacuation drills were undertaken to ensure staff knew how to respond to protect people in the event of an emergency. People had personal evacuation plans in place.

Staffing and recruitment

- People were protected from risks associated with the employment of unsuitable staff as safe recruitment practices were followed.
- Checks on staff were completed before they started work. This included screening with the Disclosure and Barring Service (DBS), checking staff's conduct in previous employment and exploring gaps in employment histories. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People were supported by enough staff who knew them well. We saw people were attended to in line with their supporting requirements. Throughout our inspection we observed staff engaging in conversations and supporting people in accordance with their support needs.

Using medicines safely

- People's medicines were kept secure in a locked cabinet in the home's office and administered safely. Medicines administration records were appropriately signed by staff when administering people's medicines.
- Staff received medicine training and practice assessments were completed to ensure they remained competent to carry out this task.
- Arrangements were in place for obtaining medicines from the hospital. This ensured people's medicines were available when required.
- Medicine audits were undertaken to ensure people received their medicines as prescribed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

People were supported to see their families in accordance with their preferences and in line with government guidance.

Learning lessons when things go wrong

- The service had systems in place for staff to report and record any accidents and/or incidents. These would then be reviewed by the registered manager to ensure the provider's policy was followed. Professionals were involved in the review of some of the incidents, for example debriefs following incidents of anxious behaviour were shared with speech and language professionals.
- People living at Foxmount have had complex and lengthy transitions into the service. The registered manager, families and professionals involved in the support of the people told us that a multi-disciplinary approach was adopted to ensure lessons were learnt and joint work continued to ensure people's safety and the sustainability of the support.

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.

This is the first inspection for this newly registered service. This key question has been rated Good.

This meant 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

- The service had a lengthy assessment process in place for the two people who lived there, spreading over several months. This enabled them to establish what people wanted their environment to look like and involved close working with the staffing team which had previously supported the people for an extensive period of time and knew them well.
- People's transition into Foxmount was phased and involved a person-centred plan to transition between the care teams supporting the people.
- For one person this transition was still ongoing while the other person is fully supported by the staffing team at Foxmount. One relative told us: "Foxmount staff are working really hard to get to know [person], a lot of people are taking it seriously, [person] is positive."
- One professional told us: "Both transitions have been extremely complex and lengthy. [Registered manager] has worked extremely hard in ensuring that Foxmount meets the needs of the individuals, from environmental factors to ensuring recruitment is person centred. The multi-disciplinary team remain really pleased with how the transitions have gone and remain in regular contact with Foxmount to ensure a multi-disciplinary team approach."
- People who used the respite provision at Foxmount were also admitted following a robust process of pre-assessment involving the person and their family.

Staff support: induction, training, skills and experience

- Staff we spoke with were positive about the training and support they received. One staff member told us that their induction, training and shadowing shifts were very good.
- Staff received the support, supervision and training they needed to meet people's needs. The service ensured that staff had a comprehensive induction and their knowledge and skill were also assessed to ensure they were competent to carry out this task.
- Staff received person specific training to support people to remain safe when they displayed anxious behaviour, according to their support requirements. Some training was facilitated by professionals such as speech and language therapists, psychologist and specialist nurses.

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

- People were supported to eat and drink in accordance with their preferences and choices.
- People were encouraged to get involved in cooking in the communal kitchen with staff support. We were told that one person prepares some meals with staff. The person used visual easy read cards to choose meals, purchase ingredients and follow recipes.

- One family member told us that their relative's diet was very good and their weight is well looked after.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The two people living at Foxmount were still under the care of the hospital. Their care, support and health needs were discussed and reviewed through weekly multi-disciplinary meetings between the home and various health and care professionals.
- People's transition journey into Foxmount was reviewed every fortnight and discharge meetings were taking place periodically.
- People were registered with a GP and weekly calls were organised to discuss people's needs.
- People were registered with a dentist. Staff were aware of people's oral health needs and were able to describe the support required. The registered manager was implementing the provider's specific oral health assessment tool and risk assessments in the service.

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

- The two flats which were permanent homes to the people living at Foxmount were designed and adapted to meet their individual needs. During the assessment process, ample time was spent learning what people would like their environment to look like according to their identified needs.
- Foxmount provided two separate flats, each consisting of their own front door and private garden. Both flats consist of a lounge, bedroom and bathroom and one flat has a kitchenette. Both flats have use of a kitchen dinner. The layout of each flat was custom adapted to people's requirements and safety.
- Both flats and the three rooms used for respite had bespoke features such as switches outside the accommodation for controlling the heating, lighting and water supply in order to ensure people were safe within their living space. Within the living space there was provision for safe use of electronic equipment such as enclosed televisions and other electronic equipment.
- The registered manager described at length the environment considerations for both people living there. For example, specialist window shutters were installed for a person who at times preferred their bedroom to be at a certain level of darkness. For another person, the environment was design to prevent anxious behaviour and maintain safety when at risk from displaying anxious behaviour

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 MCA 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.

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 appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager ensured Deprivation of Liberty Safeguards (DoLS) were applied for people whose liberties were being restricted. DoLS applications had been supported by mental capacity assessments and

best interest assessments. Any conditions related to DoLS authorisations were being met.

- Where possible people were supported to make decisions about their care. People's representatives told us they were included in decisions regarding the person's care.
- The registered manager and staff had received training in mental capacity and deprivation of liberty safeguards.

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.

This is the first inspection for this newly registered service. This key question has been rated Good.

This meant 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

- The staff received Equality and Diversity training and we observed people being treated with kindness and respect.
- One family member told us that their relative feels comfortable with staff and that they are calm, settled and trust the staff who support them and also that staff speak to the person in a calm manner and address them well.
- Staff knew people well and understood the things they liked and made them happy. One staff described to us how they interact with one person by talking quietly, listening and observing them.
- A professional told us: "From observations the staff communicated with [person] really well, it was evident they have built a trusting relationship with [person] in a short period of time which was lovely to see."

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

- The service was taking a multi-disciplinary team approach to support the people living at Foxmount to decide and review how they received care. The people, their relatives and representatives were also involved in this process.
- The care documentation we looked at reflected people's voice, their wishes and preferences.
- A professional told us: "[Registered manager] has ensured the individuals voices are heard and uses letters with one individual to ensure [person] has opportunities to express [person's] concerns and views."

Respecting and promoting people's privacy, dignity and independence

- The provider had a privacy and dignity policy in place and during our inspection we observed staff treat people with respect and dignity. For example, we observed staff supporting one person with a debrief activity following an instance of anxious behaviour. The person signalled that they wish staff to leave the room, request which staff followed.
- We observed another person being supported by two staff members in their flat. Staff were observed monitoring the person independently carrying out their set routines for the time of the day, routines which had been established by the person and were important to them.
- The service ensured they maintained their responsibilities in line with the General Data Protection Regulation (GDPR) to keep people's personal information private. GDPR is a legal framework that sets guidelines for the selection and processing of personal information of individuals. Records were stored safely which maintained people's confidentiality.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The registered manager provided us with background information, including details about the vision behind the service offered to people at Foxmount. The building was purchased by the provider after consultation with local commissioners who were looking for specialised provision for people who express themselves through behaviour. The aim for creating the service was to offer people who have spent lengthy amounts of time in hospital settings support to go back to living in the community.
- In addition, Foxmount was designed to offer respite facilities to provide people support at key times with a view to so that families could have a break to continue to support people in their own homes and prevent hospital admissions.
- When designing and planning the service at Foxmount, the provider took into account reports published by CQC such as "Out of sight – who cares?" and the statutory guidance of Right Support, Right Care, Right Culture as the baseline for the service they provided.
- The environment at Foxmount has been designed specifically for the people who live in the two flats with care and consideration and by involving the people, their families and representatives, staff and various professionals.
- The home was design around people's needs. The home had four entrances, one for each flat, one for the respite provision and one for access to the staff office. This was aimed to ensure that coming and goings do not impact on the people who live there. Each flat had a private garden for sole use by the person living in the flat. This ensured that people had their own door, safe garden and an apartment which gave people a sense of space of their own and offered privacy, dignity and a sense of independence.
- The fixtures and fittings in the rooms where designed with safety considerations in mind, to ensure people's risks are mitigated while in keep with the Georgian feel of the building. For example, the lighting was chosen to be robust enough to remain safe in situations of repeated striking but to look like standard domestic lighting and the fire system was chosen specifically to be at the highest anti-ligature standards.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were identified and assessed. The care documentation includes information about preferred ways in which the person likes to communicate. For example, one person who

uses picture cards for communication, the care plan explained how to use now and next and choice boards, their symbol folder, their daily boards and travel schedule. Information also described the person's needs in regards to communication and the use of visual scripts.

- People were given the opportunity to talk to staff, if they chose to, following instances of anxious behaviour.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The registered manager facilitated and exceptionally people focused culture. The ethos of the service focused on offering the people living at Foxmount a good and safe community engagement.
- People were supported to engage in activities which they chose and enjoyed, both in their home and in the community, and these were planned into structured daily routines which helped minimise people's anxieties.
- People were supported to visit their families safely and to receive visitors into their homes.

Improving care quality in response to complaints or concerns

- The service has not received any complaints. Staff and relatives we spoke to told us that they are confident in raising concerns should they need to and were aware on how to raise any issues.
- One relative told us that any concerns they have raised have been acted upon straight away and in some instances the staff team had already up on the issues.

End of life care and support

- The service did not support anyone at end of life at the time of our inspection. Policies and procedures would support people's needs at the end of their life, if needed.

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.

This is the first inspection for this newly registered service. This key question has been rated Good.

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

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service benefitted from good leadership. The staff, relatives and professionals spoke positively about the registered manager.
- Staff told us that they felt supported by the registered manager, that they work close as a team and support each other. One staff member told us: "I am really happy and have support from [registered manager] and the core team."
- One professional told us: "The registered manager has done a huge amount of work with professionals", that they are: "driving the flexibility" ; "[registered manger] has a very clear vision which is distilled down to her staff." They described the service as: "A safe pair of hands that had facilitated good discharges."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood their role. There was a clear structure in the home and staff had clearly defined roles and responsibilities.
- There was an effective system in place to monitor and improve the quality of care people received. The registered manager carried out a range of audits in relation to people's medicines, infection prevention control, people's anxious behaviours as well as a manager monthly audit of the service.
- The provider had a system in place for the oversight of the governance systems and the registered manager, who is also the provider, worked jointly with the other registered managers in the company to ensure and maintain a robust quality assurance system.
- The registered manager was fully aware of their legal responsibility to notify CQC of notifiable events. The provider understood their responsibility to be open and honest when an incident had occurred.

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

- A range of multi-disciplinary meetings were held which offered the opportunity for feedback from relatives and professionals.
- The service held regular staff meetings, core team meetings and management meetings.
- The provider distributed a newsletter to the families which was designed involving people using the services and included stories from the people.

- One professional told us: "they [the service] have been really good and flexible and have worked incredibly well with families."
- Very positive feedback had been recently received from professionals working to support the people living at Foxmount.
- One family member told us that they are given opportunity to give feedback and that they have been involved in various discussions about how things are going for their relative.
- One professional told us: "[registered manager] has also worked hard to embrace ideas and views from independent supporters to help the development of the service."

Working in partnership with others; Continuous learning and improving care

- The provider had worked closely with local commissioners to develop a service which specialised in supporting people who express themselves through their behaviour.
- The service and registered manager worked closely and were supported by a wide range of health care professionals to continue to develop the service to achieve the best outcomes for the people living at Foxmount.
- The registered manager told us that they are continuously looking for opportunities to learn and improve best practice.
- The registered manager was co-chair of the Gloucestershire Care Providers Association (GCPA). The association promotes, develops and protects the work/interest of all independent providers of care and support services in Gloucestershire.