

Ms Catherine Burns

# Feng Shui House Care Home

## Inspection report

661 New South Promenade  
Blackpool  
FY4 1RN

Tel: 01253342266  
Website: [www.fengshuihouse.co.uk](http://www.fengshuihouse.co.uk)

Date of inspection visit:  
08 March 2016

Date of publication:  
04 April 2016

## 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

We carried out an unannounced comprehensive inspection of this service on 12 March 2015. Breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches.

During our inspection undertaken on 08 March 2016 we found no breaches of legal requirements.

Feng Shui House Care Home is registered for the regulated activity accommodation for persons who require nursing or personal care for 20 people. The home is located in the seaside resort of Blackpool overlooking the south promenade. All bedrooms have en suite facilities. A hairdressing salon and therapy room is also in place for the use of people staying at the home. Off street parking is available for visitors. At the time of our inspection visit there were 19 people who lived at the home.

The registered provider was an individual who also managed the home on a day to day basis. Registered providers 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.

We found recruitment procedures were safe with appropriate checks undertaken before new staff members commenced their employment. Staff spoken with and records seen confirmed they had received induction training when they commenced working at the home. One staff member said, "I had to wait for my references and Disclosure and Barring Service checks (DBS) to be completed before I could start working at the home. I understand these checks are required to ensure I do not have a criminal record."

Staff had received training and were knowledgeable about their roles and responsibilities. They had skills, knowledge and experience required to support people with their care and social needs.

We found sufficient staffing levels were in place to provide support people required. We saw staff could undertake tasks supporting people without feeling rushed. People told us when they requested assistance this was responded to in a timely manner. One person said, "I have my alarm with me at all times and know staff will come running if I press it. This makes me feel safe."

We found the registered provider had systems in place to record safeguarding concerns, accidents and incidents and take necessary action as required. Staff had received safeguarding training and understood their responsibilities to report any unsafe care or abusive practices. People we spoke with told us they felt safe and their rights and dignity were respected.

The registered provider understood the requirements of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). This meant they were working within the law to support people who may lack capacity to make their own decisions.

We looked around the home and found it was clean, tidy and well-maintained. No offensive odours were observed by the inspection team. We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. This meant staff were protected from potential infection when delivering personal care and undertaking cleaning duties. People who lived at the home told us they were happy with the standard of hygiene in place.

Equipment used by staff to support people had been maintained and serviced to ensure they were safe for use.

We found care plans were organised and had identified the care and support people required. We saw people or a family member had been involved in the assessment and had consented to support provided. We found care plans were informative about care people had received. They had been kept under review and updated when necessary to reflect people's changing needs. People we spoke with said they were happy with their care and they liked living at the home.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

People told us they were happy with the variety and choice of meals available to them. We saw regular snacks and drinks were provided between meals to ensure people received adequate nutrition and hydration. We observed the lunch time meal which was well organised. People who required support to eat their meals were supported by staff who were caring and patient. The cook had information about people's dietary needs and these were being met.

We found people had access to healthcare professionals and their healthcare needs were met. On the day of our inspection visit we saw one person was supported by a staff member to attend a hospital appointment. This ensured the service had up to date information about the outcome of the person's appointment.

People told us they were happy with activities arranged to keep them entertained. On the day of our inspection visit a party had been arranged to celebrate the birthday of one person who lived at the home.

We found medication procedures in place at the home were safe. Staff responsible for the administration of medicines had received training to ensure they had the competency and skills required. Medicines were safely kept and appropriate arrangements for storing were in place.

The service had a complaints procedure which was made available to people on their admission to the home. People we spoke with told us they knew how to make a complaint if they had any concerns.

The registered provider used a variety of methods to assess and monitor the quality of the service. These included staff, resident meetings and care reviews. We found people were satisfied with the service they received.

## 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 was safe.

The service had procedures in place to protect people from abuse and unsafe care.

Staffing levels were sufficient with an appropriate skill mix to meet the needs of people who lived at the home. The deployment of staff was well managed providing people with support to meet their needs. Recruitment procedures the service had in place were safe.

Assessments were undertaken of risks to people who lived at the home and staff. Written plans were in place to manage these risks. There were processes for recording accidents and incidents.

People were protected against the risks associated with unsafe use and management of medicines. This was because medicines were managed safely.

Good 

### Is the service effective?

The service was effective.

People were supported by staff who were sufficiently skilled and experienced to support them to have a good quality of life.

People received a choice of suitable and nutritious meals and drinks in sufficient quantities to meet their needs.

The registered provider was aware of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguard (DoLS). They had knowledge of the process to follow.

Good 

### Is the service caring?

The service was caring.

People were able to make decisions for themselves and be involved in planning their own care.

Good 

We observed people were supported by caring and attentive staff who showed patience and compassion to the people in their care.

Staff undertaking their daily duties were observed respecting people's privacy and dignity.

### **Is the service responsive?**

**Good** ●

The service was responsive.

People participated in a range of activities which kept them entertained.

People's care plans had been developed with them to identify what support they required and how they would like this to be provided.

People told us they knew their comments and complaints would be listened to and acted on effectively.

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

**Good** ●

The service was well led.

Systems and procedures were in place to monitor and assess the quality of service people received.

The registered provider had clear lines of responsibility and accountability. Staff understood their role and were committed to providing a good standard of support for people in their care.

A range of audits were in place to monitor the health, safety and welfare of people who lived at the home. Quality assurance was checked upon and action was taken to make improvements, where applicable.

# Feng Shui House 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 checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 08 March 2016 and was unannounced.

The inspection team consisted of an adult social care inspection manager and adult social care inspector.

Before our inspection on 08 March 2016 we reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the home and previous inspection reports. We also checked to see if any information concerning the care and welfare of people who lived at the home had been received.

We spoke with a range of people about the service. They included the registered provider, manager, five staff members and four people who lived at the home. We also spoke to the commissioning department at the local authority. This helped us to gain a balanced overview of what people experienced accessing the service.

We looked at the care records of four people, training and supervision records, arrangements for meal provision, records relating to the management of the home and the medication records of four people. We reviewed the services recruitment procedures and checked staffing levels. We also undertook a tour of the building to ensure it was clean, hygienic and a safe place for people to live.

# Is the service safe?

## Our findings

People we spoke with us told they felt safe when supported with their care. Observations made during our inspection visit showed they were comfortable in the company of staff supporting them. One person who lived at the home said, "I feel a lot safer here than when I was living at home as I was on my own. I enjoy being in the company of others and like having staff around if I need them." Another person said, "I feel very safe here. The staff are kind and patient with me and I am happy."

Staff spoken with told us they had received mandatory moving and handling training and they felt competent when using moving and handling equipment. We observed staff assisting people with mobility problems in the lounge. We saw people were assisted safely and appropriate moving and handling techniques were used. The techniques we saw helped staff to prevent or minimise the risk of injury to themselves and the person they supported.

The registered provider had procedures in place to minimise the potential risk of abuse or unsafe care. Staff members we spoke with understood what types of abuse and examples of poor care people might experience. They told us they were aware of the whistleblowing procedure the service had in place. They said they wouldn't hesitate to use this if they had any concerns about their colleagues care practice or conduct.

Discussion with the registered provider confirmed she had an understanding of safeguarding procedures. This included when to make a referral to the local authority for a safeguarding investigation. The registered provider was also aware of her responsibility to inform the Care Quality Commission (CQC) about incidents in a timely manner. This meant we would receive information about the service when we should do.

We looked at the services duty rota, observed care practices and spoke with people supported with their care. We found staffing levels were suitable with an appropriate skill mix to meet the needs of people who used the service. We saw the deployment of staff throughout the day was organised. People who required support with their personal care needs received this in a timely and unhurried way. The atmosphere in the home was calm and relaxed and we saw staff engaged with people they supported in conversation and laughter. One person who lived at the home said, "The staff are always around if you need them." Another person said, "I have my alarm with me at all times and know staff will come running if I press it. This makes me feel safe."

We looked around the home and found it was clean, tidy and well-maintained. No offensive odours were observed by the inspection team. We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. Hand sanitising gel and hand washing facilities were available around the building. These were observed being used by staff undertaking their duties. This meant staff were protected from potential infection when delivering personal care and undertaking cleaning duties.

People who lived at the home told us they were happy with the standard of hygiene in place. One person

said, "I am happy with the standard of cleanliness in the home. My room is clean and tidy."

We found equipment had been serviced and maintained as required. Records were available confirming gas appliances and electrical facilities complied with statutory requirements and were safe for use. Equipment including moving and handling equipment (hoist and slings) were safe for use. We observed they were clean and stored appropriately, not blocking corridors or being a trip/fall hazard. The fire alarm and fire doors had been regularly checked to confirm they were working. During a tour of the building we found windows were restricted to ensure the safety of people who lived at the home. We checked a sample of water temperatures and found these delivered water at a safe temperature in line with health and safety guidelines.

People who lived at the home had been issued with personal alarms if they wanted to request assistance. These were a lightweight pendant worn around their neck. The pendants enabled people the freedom to live independently in the home, safe in the knowledge that if they needed assistance or had a fall, they could get help quickly. One person said, "I have my alarm with me all the time. If you need the staff you just press the button and they will be with you in no time."

Care plans seen had risk assessments completed to identify the potential risk of accidents and harm to staff and people in their care. The risk assessments we saw provided clear instructions for staff members when delivering their support. We also saw the registered provider had undertaken assessments of the environment. Where potential risks had been identified the action taken by the service had been recorded.

We looked at how medicines were prepared and administered. Medicines had been ordered appropriately, checked on receipt into the home, given as prescribed and stored and disposed of correctly. We looked at medication administration records for four people following the morning medication round. Records showed all morning medication had been signed for. We checked this against individual medication packs which confirmed all administered medication could be accounted for. This meant people had received their medication as prescribed.

We observed one staff member administering medication during the lunch time round. We saw the medication cabinet was locked securely whilst attending each person. People were sensitively assisted as required and medicines were signed for after they had been administered.

## Is the service effective?

### Our findings

People received effective care because they were supported by an established and trained staff team who had a good understanding of their needs. Our observations confirmed the atmosphere was relaxed and people had freedom of movement. We saw people had unrestricted movement around the home and could go to their rooms if that was their choice. We saw people visiting the home were made welcome by staff and updated about their relative/friends welfare. One person who lived at the home said, "I had breakfast in bed this morning but like to come down to the lounge mid-morning as I enjoy being in company. The staff are very accommodating."

We spoke with staff members and looked at individual training records. Records seen confirmed staff training covered basic first aid, understanding diabetes, moving and handling, fire safety, infection control and health and safety. Staff responsible for administering people's medicines had received medication training and had been assessed as competent. All staff had achieved or were working towards national care qualifications. This ensured people were supported by staff who had the right competencies, knowledge, qualifications and skills.

The registered provider told us her staff had been registered to attend training facilitated by Blackpool Borough Council regarding dementia awareness. 'Let's respect' training is provided specifically for staff working with people who lived with dementia. The course aims to increase staff awareness of the need to create a welcoming environment for friends, family and visitors to the home.

Discussion with staff and observation of records confirmed they received supervision from the registered provider or manager. These are one to one meetings held on a formal basis with their line manager. Staff told us they could discuss their development, training needs and their thoughts on improving the service. They told us they were also given feedback about their performance. They said they felt supported by the management team who encouraged them to discuss their training needs and be open about anything that may be causing them concern. One staff member said the registered provider was the best employer they had ever worked for.

The people we spoke with told us they enjoyed the food provided by the home. They said they received varied, nutritious meals and had plenty to eat. The service didn't work to a set menu and people were asked daily about meals and choices available to them for the day. On the day of our inspection visit choices provided were sausage, bacon, egg, hash browns, beans and toast or an alternative of people's choice. One person we spoke with said, "The meals are very good and I always look forward to them." Another person said, "Very happy with the quality of food and we get plenty to eat."

At lunch time we carried out our observations in the dining room. We saw lunch was a relaxed and social experience with people talking amongst each other whilst eating their meal. We observed different portion sizes and choice of meals were provided as requested. We saw most people were able to eat independently and required no assistance with their meal. The staff did not rush people allowing them sufficient time to eat and enjoy their meal. People who did require assistance with their meal were offered encouragement and

prompted sensitively.

We saw people who experienced swallowing difficulties had their meals blended and staff sat with them whilst they ate their meal. We saw one person who wasn't enjoying their meal was immediately offered an alternative meal which was accepted. Drinks were provided and offers of additional drinks and meals were made where appropriate. The support we saw provided was organised and well managed.

We spoke with the cook about meal preparation and people's nutritional needs. They confirmed they had information about special diets and personal preferences and these were met. They told us this information was updated if somebody's dietary needs changed. When we undertook this inspection there was one person having their diabetes controlled through their diet. Three people who experienced swallowing difficulties were provided with a soft diet. The cook was able to fortify foods as required.

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 provider understood the requirements of the Mental Capacity Act (2005). This meant they were working within the law to support people who may lack capacity to make their own decisions. We did not see any restrictive practices during our inspection visit and observed people moving around the home freely.

People's healthcare needs were carefully monitored and discussed with the person as part of the care planning process. Care records seen confirmed visits to and from General Practitioners (GP's) and other healthcare professionals had been recorded. The records were informative and had documented the reason for the visit and what the outcome had been. This confirmed good communication protocols were in place for people to receive continuity with their healthcare needs.

On the day of our inspection visit we saw one person was supported by a staff member to attend a hospital appointment. This ensured the service had up to date information about the outcome of the person's appointment and their care records could be updated.

## Is the service caring?

### Our findings

During our inspection visit we spent time observing interactions between staff and people in their care. This helped us assess and understand whether people who used the service received care that was meeting their individual needs. We saw staff were caring, attentive and available when people needed them. They were observed being polite, respectful, kind and showed compassion when supporting people. We spoke with four people about their care. They told us they were happy and couldn't receive better care anywhere. One person said, "I am happy with my care the girls are lovely, friendly people. It is excellent here as far as I am concerned."

Throughout the inspection visit we saw people were able to make decisions for themselves. We observed routines within the home were relaxed and arranged around people's individual and collective needs. We saw they were provided with the choice of spending time on their own or in the lounge area. The home had a relaxed atmosphere.

The people we spoke with told us they were supported to express their views and wishes about all aspects of life in the home. We observed staff enquiring about people's comfort and welfare throughout the inspection visit. We saw they responded promptly if people required any assistance.

We looked at care records of four people. We saw evidence they had been involved with and were at the centre of developing their care plans. The four people we spoke with told us they were encouraged to express their views about how their care and support was delivered. The plans contained information about people's current needs as well as their wishes and preferences. Daily records completed were up to date and well maintained. These described the daily support people received and the activities they had undertaken. The records were informative and enabled us to identify how staff supported people with their daily routines. We saw evidence to demonstrate people's care plans were reviewed with them and updated on a regular basis. This ensured staff had up to date information about people's needs.

We saw evidence that people's preferences and wishes were being accommodated. For example the care records of one person had identified the person liked to have their hair tied back. The staff had also recorded the person liked to wear a safety belt whilst sat in their wheelchair. Our observations confirmed this person's wishes had been met.

We saw staff had an appreciation of people's individual needs around privacy and dignity. We observed they spoke with people in a respectful way, giving people time to understand and reply. We observed they demonstrated compassion towards people in their care and treated them with respect. Walking around the home we observed staff undertaking their duties. We noted they knocked on people's doors and asked if they could enter. One person we spoke with said, "I have no issues with my care. The staff are respectful towards me and treat me with dignity when providing my care."

We spoke with the registered provider about access to advocacy services should people require their guidance and support. The registered provider had information details that could be provided to people

and their families if this was required. This ensured people's interests would be represented. They could access appropriate services outside of the service to act on their behalf if needed.

Before our inspection visit we received information from external agencies about the service. They included the commissioning department at the local authority.

## Is the service responsive?

### Our findings

People who lived at the home told us they received a personalised care service which was responsive to their care needs. They told us the care they received was focussed on them. They said were encouraged to make their views known about care and support they received. We saw there was a calm and relaxed atmosphere when we visited. We observed staff undertaking their duties and saw they could spend time with people making sure their care needs were met. One person we spoke with said, "It's excellent here as far as I am concerned. The staff are caring and attentive towards me and available when I need them."

We looked at care records of four people to see if their needs had been assessed and consistently met. We found each person had a care plan which detailed support they required. The care plans had been developed where possible with each person. This identified what support they required and how they would like this to be provided. People who had been unable to participate in the care planning process had been represented by a family member or advocate. We saw people had been at the centre of planning and decision making about their care and the support provided. One person we spoke with said, "I am happy and wouldn't want to go anywhere else. There is always a member of staff available if you them which I find reassuring."

The care records we looked at were informative and enabled us to identify how staff supported people with their daily routines and personal care needs. People's likes, dislikes, choices and preferences for their daily routine had been recorded. The care plans had been signed by staff confirming they had read them and understood the support people required. We found care plans were flexible, regularly reviewed for their effectiveness and changed in recognition of the changing needs of the person. Personal care tasks had been recorded along with fluid and nutritional intake where required. People were having their weight monitored regularly.

The care records of one person had identified prior to their admission to the home they had been unwell had recently lost two stone in weight. We saw on the person's admission the service had had made a referral for a dietitian and introduced food charts to monitor their nutritional intake. Within five months the person had gained 9lb in weight and their health had improved for them to be able to return home. We noted a comment on the person's care records which said, 'I would like to thank you for rehabilitatining [relative] to the point where they are able to come back and live with their family.'

People told us they were happy with the activities arranged to keep them entertained. On the day of our inspection visit a party had been arranged to celebrate the birthday of one person who lived at the home. We observed staff making a fuss of the person concerned and people who lived at the home wishing them happy birthday. One person we spoke with said, "We have some smashing parties here."

The registered provider had a complaints procedure which was made available to people on their admission to the home. We saw the complaints procedure was also on display in the lounge for the attention of people visiting. The procedure was clear in explaining how a complaint should be made and reassured people these would be responded to appropriately. Contact details for external organisations

including social services and CQC had been provided should people wish to refer their concerns to those organisations.

People told us they were comfortable with complaining to staff or the registered provider when necessary. One person said, "There is nothing that I object to here. However if I wasn't happy I wouldn't hesitate to speak up." Another person said, "I cannot think of anything to complain about. I have to say living in a home has been a much better experience than I imagined. I am happy."

## Is the service well-led?

### Our findings

Comments received from staff and people who lived at the home were positive about the registered provider's leadership. Staff members spoken with said they were happy with the leadership arrangements in place. They said they had no problems with the management of the service. One member of staff said, "This is the best home I have worked in. The management and staff are really supportive of each other."

Staff spoken with demonstrated they had a good understanding of their roles and responsibilities. Lines of accountability were clear and staff we spoke with stated they felt the registered provider and her manager worked with them and showed leadership. The staff told us they felt the service was well led and they got along well as a staff team and supported each other. People told us the atmosphere was relaxed, fair, and open.

The registered provider, her manager and staff on duty were knowledgeable about the support people in their care required. They were clear about their role and were committed to providing a high standard of care and support to people who lived at the home.

The registered provider had procedures in place to monitor the quality of the service provided. Regular audits had been completed. These included monitoring the environment and equipment, maintenance of the building, infection control, reviewing care plan records and medication procedures. Any issues found on audits were acted upon and any lessons learnt to improve the service going forward.

Staff meetings had been held to discuss the service provided. We looked at minutes of the most recent team meeting and saw topics relevant to the running of the service had been discussed. These included training available to the staff team. We also saw the registered provider had discussed the standards she expected from her staff team for compliance with future CQC inspections. Staff spoken with confirmed they attended staff meetings and were encouraged to share their views about the service provided.

We found the registered provider had sought the views of people who lived at the home about their care by a variety of methods. These included resident meetings and completed questionnaires. We saw people had commented they were happy with their care, meals provided and activities organised. We also saw visiting healthcare professionals had taken time to complete a questionnaire about the service provided. We noted their comments were positive about their observations during their visits.

Throughout the inspection we observed the atmosphere in the home was relaxed. People who lived at the home were observed being comfortable in the company of the staff. Discussion with staff members confirmed there was a culture of openness in the home to enable them to question practice and suggest new ideas.

Legal obligations, including conditions of registration from CQC, and those placed on them by other external organisations were understood and met.