

## Sohal Health Care Limited

# Firstlings


### Inspection report

Firstlings  
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Heybridge  
Maldon  
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Website: [www.example.com](http://www.example.com)

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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 

#### Overall summary

We inspected on 31 October 2014 and this was unannounced. Firstlings provides accommodation and personal care for up to 32 older people who require 24 hour support and care. Some people are living with dementia. There were 31 people living in the service at the time of this inspection.

A registered manager was 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 legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People who used the service and their relatives told us that the service was a safe place to live. There were

# Summary of findings

procedures in place which advised staff about how to safeguard the people who used the service from abuse. Staff understood the various types of abuse and knew who to report any concerns to.

There were procedures and processes in place to guide staff on how to ensure the safety of the people who used the service. These included checks on the environment and risk assessments relating to people's health and welfare. As a consequence risks to people were minimised.

There were appropriate arrangements in place to ensure people's medicines were obtained, stored and administered safely.

There were sufficient numbers of staff who were trained and supported to meet the needs of the people who used the service. People and their relatives told us that the staff were available when they needed them.

Staff had good relationships with people who used the service and were attentive to their needs. Staff respected people's privacy and dignity and interacted with people in a caring, respectful and professional manner.

People, or their representatives, were involved in making decisions about their care and support. People's care plans had been tailored to the individual and contained information about how they communicated and their

ability to make decisions. The service was up to date with recent changes to the law regarding the Deprivation of Liberty Safeguards and at the time of the inspection they were working with the local authority to make sure people's legal rights were protected.

People were supported to see, when needed, health and social care professionals to make sure they received appropriate care and treatment.

People spoke highly about the quality of the food and the choices available. Their nutritional needs were being assessed and met. Where concerns were identified about a person's food intake, or ability to swallow, appropriate referrals had been made for specialist advice and support.

People were comfortable to raise any concerns with the staff, manager or provider. People confirmed that where they had made comments about the service they had been kept informed of the changes made and their concerns were acted upon promptly.

People, their relatives and staff were complimentary about the management of the service. Staff understood their roles and responsibilities in providing safe and good quality care to the people who used the service. The service identified shortfalls in the service provision and took actions to address them.

# Summary of findings

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

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

The provider had systems in place to manage safeguarding matters. Staff understood how to recognise abuse or potential abuse and how to respond and report these concerns appropriately.

There were enough staff to meet people's needs. This was confirmed in our observations, discussions with staff and records.

There were systems in place to manage people's medication safely and to provide their medication as prescribed.

Good



### Is the service effective?

The service was effective.

Staff were trained and supported to meet the needs of the people who used the service. The Deprivation of Liberty Safeguards (DoLS) were understood by staff and appropriately implemented.

People were supported to maintain good health and had access to appropriate services which ensured they received on-going healthcare support.

People made choices about what they wanted to eat and drink and the quality of the food provided was good. People's nutritional needs were assessed and professional advice and support was obtained for people when needed.

Good



### Is the service caring?

The service was caring.

Staff were caring and considerate. They supported people to maintain their dignity and treated them with respect.

The atmosphere in the home was warm and very welcoming.

Good



### Is the service responsive?

The service was responsive.

People's wellbeing and social inclusion was assessed, planned and delivered to meet their needs.

People's concerns and complaints were investigated, responded to and used to improve the quality of the service.

Good



### Is the service well-led?

The service was well-led.

Systems were in place to ensure that the quality of the service was consistent.

The management team were aware of the day to day culture in the home and staff were updated on new and changing methods to ensure best practice.

Good



# Firstlings

## 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. This inspection took place on 31 October 2014 and was unannounced.

The inspection team consisted of two Inspectors and an Expert by Experience. An Expert by Experience is a person who has experience of using or caring for someone who uses this type of service. The expert by experience had experience of older people and people living with dementia.

Before our inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

To help us plan what areas we were going to focus on during our inspection, we looked at the PIR and reviewed information we had received about the service such as notifications. This is information about important events which the service is required to send us by law. Information sent to us from other stakeholders for example the local authority and members of the public were also reviewed.

We spoke with eight people who were able to express their views about the service and four relatives. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We looked at records in relation to four people's care. We spoke with eight staff, including the deputy manager, care staff, domestic staff and catering staff. We also spoke with the registered manager. We looked at records relating to the management of the service, staff recruitment and training records, and systems for monitoring the quality of the service. We spoke with a health professional about their views of the service.

# Is the service safe?

## Our findings

People told us they felt safe. One person told us "I have never doubted it was safe and I have got no worries here" Another person said "The staff are very nice to me – I have got no complaints".

People told us that staff were available to provide them with support. One person said, "Staff are good they come when I call and always help when I need it". We saw there were sufficient staffing levels provided to meet people's needs and care for them safely.

The registered manager confirmed that additional staff would be provided when necessary. For example, we saw that two people required one to one supervision at certain times of the day and the additional staffing had been provided to support these people's assessed needs. This enabled people to be safe in the activities they chose to do. People felt that staff were available to provide them with support. One person said, "Staff are good they come when I call and always help when I need it". Another person said, "Sometimes you have to wait when staff are busy but they come as quickly as they can".

Risks to people's safety were appropriately assessed, managed and reviewed. Risk assessments had been completed on areas such as moving and handling, nutrition and skin care to ensure that people were protected from risk of harm. We observed safe and efficient moving and handling techniques by staff. A visiting professional told us that they were confident that pressure area care was being managed effectively to keep people safe. They commented that staff were clear about their responsibilities and knew when to seek help and guidance.

All newly appointed staff received awareness training around safeguarding of adults within the first week of commencing employment to ensure that they were aware of what abuse was, how to identify it what to do if they saw or suspected abuse was occurring. They then completed regular updates in order to keep them aware and alert.

Staff demonstrated they had understood the training and how to put it into practice. One staff member said, "I would tell the manager or deputy straight away."

A relative told us, "The staff always talk to me about my relatives care" they also said "I feel that my relative is safe here."

Required checks had been completed prior to staff commencing their employment including a Disclosure and Barring Service (DBS) criminal records check, previous employment references and a health check. This ensured only appropriate care workers were employed to work with people at the home.

Staff supported people with their medication they did so in a way that was respectful and polite and in the person's preferred way. For example staff sat with people offering choice and reassuring them while they took their medication. There was a medication policy and procedure in place to guide staff on obtaining, recording, handling, using, safe-keeping, dispensing, safe administration and disposal of medicines. People's care plans and medication records contained an up to date list of their current medicines informing staff of why and what they were prescribed for. We saw that information was available in regard to side effects and adverse reactions for staff to be aware of.

# Is the service effective?

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# Is the service caring?

## Our findings

People and their relatives all made positive comments about the staff team at Firstlings such as, "They [staff] are brilliant".

There was a warm and friendly atmosphere in the home. People who lived in the home and staff were seen to be socialising and having fun with laughter and lots of smiles. Staff told us they liked to get to know people, so they could chat about things that were important to them especially those living with dementia. This showed that staff were committed and had a good attitude in their roles.

A relative that we spoke with told us " The care is very good, I have no worries about my relative, I come and go as I please, they the [ staff ] always keep me informed." Another relative told us "The manager and staff told me that I can visit my relative at any time of the day." They also told us "The communication is excellent, people always let me know if my relative is unwell."

One person told us "I think it is the best place I have been the staff go the extra mile, they are aware of your needs and if I have something to comment about with the nurse or the carers then the next time they come a solution is provided".

Throughout our inspection we saw that staff were courteous, caring and patient when supporting people. People were given time to make decisions. For example, staff were seen to use pictures where one person was having difficulty in understanding of what meal was on offer. They repeated the information and showed the pictures, gently encouraging them to make a decision. We saw that people's privacy and dignity was protected, for example, staff were seen to knock and wait for an answer before entering people's bedrooms. One person we spoke with said, "Staff always knocks before they come in".

# Is the service responsive?

## Our findings

People told us that they had their choices respected. One person told us "I can talk to my key worker or the manager if I have any concerns or worries." Another person told us "Staff understand my needs well and know how to respond to them."

The care given was planned for and documented in a way that helped staff to understand people's individual needs and choices. Risk assessments showed their preferences and wishes were promoted and respected and staff followed the agreed methods of delivering care and support. For example we saw people encouraged to be independent as possible. In another case we saw that efforts were being made to support someone whose first language was not English in a way that helped them to be involved with planning their care. The person was [pleased and as a result was more engaged with their daily life.

During our inspection we observed people being offered choices by staff about their care. For example what food they would like and if they would like to join in activities which were being put on in the home.

A variety of activities from sing-alongs, reminiscence, quizzes and trips out in the local community were provided an activities co-ordinator.. There was a board in the home full of photographs of the activities that had taken place

and people were smiling and looked like they were enjoying themselves. Staff told us that every shift was different and that at times they were able to spend more time with people.

Throughout our inspection we heard staff asking people what they would like to do or where they would like to sit, what they would like to drink. One person wanted to go to their bedroom and staff promptly supported them to retire to their bedroom.

A complaints procedure was provided and available for people, so they would know how to raise any concerns. One relative said, "Where I had a concern the manager and I worked through it to resolve it". Another relative said, "The manager is very welcoming and professional", another said, "I feel confident that I would be listened to and action would be taken". This showed us that concerns could be raised and that the registered manager was open to resolving the issues.

We saw that call bells were responded to promptly. Staff responded and understood people and were able to meet their needs. Staff were able to tell us how they communicated with people and that there were different methods available including pictorial information. Health professionals we spoke with told us that they had seen staff use pictures to help some people make a choice, especially around food and drink. This meant people were offered and given individual choices to meet to meet their preference.



# Is the service well-led?

## Our findings

Staff demonstrated they provided kind and compassionate care. This was behaviour that was expected from the leadership of the home who staff took a lead from.

The service had a registered manager in post who was supported by other senior staff. The senior team demonstrated an excellent knowledge of all aspects of the service, the people using the service and the staff team.

We received positive comments about the service and how it was managed and led. Health professionals we spoke with said, “It is a very well-run home, staff always communicate with us and telephone us for advice” and “Staff manage people with behaviours which challenge others brilliantly and they should be very proud of how they care for the residents and how they run the home”.

A relative told us “The manager and staff told me that I can visit my relative at any time of the day.” They also told us “The communication is excellent, people always let me know if my relative is unwell.”

One person told us “I think it is the best place I have been the staff go the extra mile, they are aware of your needs and if I have something to comment about with the nurse or the carers then the next time they come a solution is provided”.

The registered manager worked well with staff and was available to support them when needed. The rota detailed the availability of the registered manager. All the staff we spoke with told us that they were very supportive and they were clear about their responsibilities. One member of staff

said, “The manager is very good and treats me with respect and is good with confidentiality”. Another said, “I feel very involved in what goes on and get the information I need to do my job”. “[the registered manager] is very supportive and I can talk to [them] about any issues, I am listened to and action is taken”. Care staff we spoke with were very happy in their roles and ensuring people received the care they needed.

A system for quality assurance monitoring was in place which included checks on cleanliness, call bell audits, and review of care records. This showed that action was taken if standards fell below what was expected by the management team.

Systems were in place to seek the views of people, relatives and professionals. From this an improvement plan was developed and ways looked at of improving the service in the coming year.

The management team involved people and their relatives in the assessment and monitoring of the quality of care. We saw that there were regular meetings where people who lived in the home were able to discuss how the home was being run and suggest changes.

Records we looked at showed that we had received all required notifications. A notification is information about important events which the service is required to send us by law in a timely way. We saw that audits had been completed on things such as: medication, fire, health and safety. We saw that when action had been identified this was followed up to ensure that action had been taken.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

This section is primarily information for the provider

## Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.