

Grey's Residential Homes Ltd

Felbury House

Inspection report

Felday Road
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Guildford
Surrey
RH5 6NL

Tel: 01306730084

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Felbury House is a residential care home providing accommodation and personal care to up to 30 people aged 65 and over, some of whom were living with dementia. At the time of our inspection, there were 24 people living at the service.

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

People told us they felt safe and that staff were kind towards them. Staff had received safeguarding training and knew how to recognise signs of abuse. Staff knew how to report concerns.

Staff were aware of risks associated with people's care and ensured people were provided with the most appropriate care. Care plans including the management of risks were recorded in a comprehensive and person-centred manner. Plans were in place to protect people in the event of a fire.

We were assured the service were following safe infection prevention and control procedures to keep people safe.

People using the service, relatives and staff were complimentary about the management of the service. They told us they felt they could approach the leadership team if they had any ideas on areas of improvement of the service. Visiting healthcare professionals spoke of the positive culture and responsive management of the service.

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

Rating at last inspection

The last rating for this service was Good (published 4 December 2018).

Why we inspected

This was a targeted inspection based on the previous rating, the information we held about the service and in line with our transitional regulatory approach framework. Targeted inspections do not look at an entire key question, only part of a key question based on the information we have received about the service.

Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

This inspection looked at certain key lines of enquiry in the key questions of Safe and Well-led.

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 coronavirus and other infection outbreaks effectively.

The overall rating for the service has not changed following this targeted inspection and remains Good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Felbury House on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Felbury House

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 based on the information we held about the service.

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

Felbury House 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.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with five members of staff including the registered manager and care staff.

We reviewed a range of records. This included four people's care records. A variety of records relating to the management of the service, including policies and procedures were reviewed. We observed practices and interactions between people using the service and staff.

After the inspection

We looked at policies and quality assurance records. We received feedback from four relatives and five healthcare professionals.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at part of the key question based on the information we held about the service.

We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff. One person said, "I feel entirely safe here. They do everything within their power." A relative said, "During the pandemic, the team have monitored developments closely and taken every precaution to keep the residents safe and well ."
- Staff understood what constituted abuse and the actions they would take if they suspected abuse. One member of staff said, "[Abuse] could be physical or financial. If there was a bruise, I would report it to the manager or the safeguarding team in the council [if appropriate action is not taken]."
- Staff received safeguarding training and held regular meetings to discuss potential safeguarding incidents. We reviewed several staff meeting records which confirmed this and one member of staff told us, "We had a safeguarding [training] course face-to-face in the summer."
- We saw that when concerns had been raised, the service reported these to the local authority in line with local safeguarding protocols.

Assessing risk, safety monitoring and management

- Care plans and assessments were in place to identify and manage risks associated with people's care. There was comprehensive information on the steps staff should take. In relation to reducing the risk of falls one member of staff told us, "[When supporting person] we remind her to use the walking stick and keep an eye on the sensor mat."
- We reviewed records including those relating to the management of falls, the risk of malnutrition and the prevention of pressure areas. In one instance, a person using the service was referred to the community physiotherapist (falls team) following a fall. As a result, the person was issued a walking aid that they used to walk independently.
- We reviewed records relating to the risk of malnutrition and saw that staff had taken action when people were identified of being at risk of losing weight, such as contacting the GP and requesting a speech and language therapist referral. This ensured that underlying reasons for the weight loss could be identified. Relatives confirmed this in the feedback we received following the inspection.
- The provider had a fire emergency plan in place and people had a personal emergency evacuation plan (PEEP). Fire exits were clearly marked and free from obstruction. Staff understood what to do in the event of a fire. One member of staff said, "We meet at the fire assembly point and check the PEEPs and the rota. Then two people will go to check the area." Another member of staff said, "We go to the fire panel and see where the fire is situated."

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.

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.

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at part of the key question based on the information we held about the service.

We will assess all of the key question at the next comprehensive inspection of the service.

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

- People and relatives were complimentary about the manager. One person said, "I can go to the manager if I need anything." Another person said, "They do their best to make things more bearable [during the COVID-19 restrictions]." A relative commented, "This [positive] attitude starts from the top and permeates the entire team. All staff there are delightful." Another relative said, "[Registered manager] is always positive and unflappable, and so responsive. It has made it so I don't worry about my mother, I know she is safe, warm and happy."
- We observed staff referring to people using their preferred name and interacting with people and colleagues in a kind manner.
- Staff were positive about the management of the service. One member of staff told us, "It's always team decisions and we are always listened to. The manager likes to push us to do NVQs [vocational training]." Another member of staff said, "Management will listen [to concerns and suggestions]."
- Visiting healthcare professionals told us they felt the service promoted a person-centred approach which achieves good outcomes for people. We found this to be the case during our inspection. One professional commented, "I personally feel quite assured and feel they do a good job as they always seem very responsive". Another professional found the service to be, "A well run caring home who are very person centred in their approach to care."

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

- People and relatives had the opportunity to offer feedback on the service and the provider acted on feedback as a result. A survey with people identified they did not always know how to raise a complaint. The provider had taken the time to ensure all people using the service knew how to raise a complaint by speaking to those individuals who said they were unsure.
- The provider had undertaken regular staff meetings. We reviewed meetings where staff had openly discussed the areas of improvement they had identified.
- Relatives told us they felt involved in their loved ones' care. One relative said, "They know who I am and exactly what's going on with my mother to answer any questions I might have. I would recommend Felbury to anyone wanting a friendly, safe home for a loved one."

- Staff told us they felt valued and supported. One member of staff said, "I feel very lucky. I can message [registered manager] if I have a concern." Another member of staff said, "I feel very much valued. We all help each other." A third member of staff said, "They [the provider] made sure we always had enough PPE (personal protective equipment) which has been a great relief [during the pandemic]."