

Richmond Fellowship (The) Foxlands House

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?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Foxlands House is a purpose built care home in a complex of supported housing services for people with mental health needs. It has six en-suite bedrooms and a number of shared living and dining spaces. At the time of our inspection, six people were using the service.

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

At this inspection we found that the service was outstanding in empowering people to have as much control over their lives as possible and to achieve their maximum potential.

People felt the care was highly personalised and staff worked well to deliver an excellent level of care. We found multiple examples to demonstrate the staff and management team were passionate about providing an innovative, responsive and excellent service to people.

People told us they felt safe using the service. Medicines were managed safely. Appropriate numbers of suitably skilled staff were deployed to meet people's needs in a timely manner. Staff followed appropriate infection control practices. Accident and incidents were recorded and acted upon. Any lessons learnt were used as opportunities to improve the quality of service.

Assessments were carried out prior to people joining the service to ensure their needs could be met. Where risks were identified, management plans were in place to manage these safely. Staff had the training, knowledge and experience to support people's needs. People were supported to maintain good health and had access to a range of healthcare services when needed. People were encouraged to eat a healthy well balanced diet for their wellbeing.

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

People's privacy, dignity and independence was promoted. People told us staff were kind and caring.

There were procedures in place to respond to complaints. The provider had investigated and responded promptly to any concerns received.

There were effective systems in place to assess and monitor the quality of the service provided.

The provider worked in partnership with healthcare services and professionals to plan and deliver an effective service.

Rating at the last inspection:

The last rating for this service was requires improvement (published 13 September 2018). The provider

completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected:

This was a planned inspection based on the previous rating.

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 any concerning information is received we may inspect sooner.

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

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.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Foxlands 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. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection Team

This inspection was completed by one inspector.

Service and service type

Foxlands House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 three people who used the service to gain their views about the service. We spoke with two members of staff and the registered manager. We also obtained feedback from two healthcare professionals.

We reviewed a range of records. This included three people's care plans, risk assessments and medicine records. We looked at four staff files in relation to recruitment, training and supervision. We also looked at records relating to the management of the service such as audits and a variety of policies and procedures developed and implemented by the provider.

After the inspection

We continued to seek clarification from the provider to validate evidence found. The provider sent us quality assurance records.

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 Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were identified and managed so that people were safe, and their freedom supported and protected.
- Comprehensive risk assessments were carried out and crisis and safety management plans were in place. These identified the risk and detailed measures for staff to manage the risks safely in various areas such as behaviours that challenged, financial abuse, self neglect, medicines, and domestic risk. Risk management plans were individualised to people's needs and requirements.
- When people behaved in a way that challenged the service, there were behaviour guidelines in place for staff. These showed the triggers and signs which would cause people discomfort and the support that was required by staff to help them feel at ease.
- Records showed the staff used proactive strategies to deal with behaviours that challenged such as giving people space, reassurance or diverting their attention to something they liked and enjoyed.
- Staff understood where people required support to reduce the risk of avoidable harm. People using the service had phones in their rooms they could use if they needed any support or in the event of an emergency. Staff also wore personal safety alarms which they could activate to enable them to respond to any type of emergency or incident promptly to keep people safe. People's care plans highlighted the level of support people required to evacuate the building safely in the event of an emergency.
- Health and safety checks including fire tests, fire drills, water temperature checks, portable appliance tests and gas safety checks were carried out to ensure the environment and equipment was safe for use.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People told us they felt safe using the service. There were safeguarding and whistleblowing policies in place and staff received training in how to safeguard adults. Where there were concerns of abuse, the registered manager had notified relevant healthcare professionals, including the local authority and CQC.
- When speaking to staff, they were able to explain the different types of abuse and the steps they would take if they suspected any potential abuse which included reporting to the local authority safeguarding team and CQC.

Staffing and recruitment

- There were adequate numbers of staff on the day of the inspection. The atmosphere was calm in the home and staff were observed not to be rushed or under any pressure. A four weekly rota was in place and staffing levels were determined and accommodated for based on people's needs, healthcare and community activities. The registered manager told us they always ensured there was flexibility with staffing levels to accommodate people's needs.

- The provider followed safe recruitment practices and had ensured all staff pre-employment checks were satisfactorily completed before they could work at the service.

Using medicines safely

- Medicines were managed safely. Medicines administration records (MARs) showed people received their medicines as prescribed. There were protocols in place for the administration of medicines that were prescribed to be given 'as required' (PRN). Records also detailed guidance for staff to ensure the people were not at risk of taking PRN medicines more than needed including specific timescales to arrange an appointment with the GP to review and assess the PRN medicines taken.
- Monthly medicines audits were carried out to ensure any discrepancies and/or gaps in recording on people's MARs were identified and followed up.
- Records showed staff had completed medicines training and their competency was checked to ensure they administered medicines safely.

Preventing and controlling infection

- The service was clean, and people were protected from the spread of infection. An Infection control policy and measures were in place for infection prevention and control. Substances that could be potentially hazardous to people's health (Control of substances hazardous to health (COSHH) were locked away and kept safely away from people.
- During the inspection, we observed staff maintaining the cleanliness of the home. Staff had completed infection control training and wore protective personal protective equipment when supporting people.

Learning lessons when things go wrong

- The provider had a system in place to record and respond to accidents and incidents. Records showed actions were taken in a timely manner including notifying relevant healthcare professionals and CQC.
- Accidents and incidents were analysed for specific trends. Any lessons learnt were used to improve the quality of service which were relayed to staff through staff meetings and to embed good practice.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has now remained the same. 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

- Assessments were carried out before people started using the service to ensure their needs could be met appropriately.
- During the assessments, expected outcomes for people's care were identified and were used to develop their care plans.

Staff support: induction, training, skills and experience

- Staff spoke positively about working for the service and told us they felt supported by their colleagues and management. A staff member told us "All is very good here and the atmosphere is very good. Any problems, the team leader will deal with it. It is always open here."
- Staff had completed an induction programme based on the Care Certificate. The Care Certificate is the benchmark that has been set for the induction standard for people working in care. Staff had completed training the provider considered mandatory in areas such as fire, safeguarding, mental health, food safety, MCA/DoLS and accident and incident reporting. Staff spoke positively about the training they received, a staff member told us "Training is good and loads of it!"
- Staff were also supported through regular supervision and appraisal which enable staff to discuss their personal development objectives and goals.

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

- People received the support they needed to eat and drink safely. Care plans contained information on people's dietary needs and individual preferences which ensured people received appropriate support with their nutritional and hydration needs.
- People were supported to get involved in decisions about their food and drink. People were encouraged and supported to devise their own menu, create a shopping list and do their own weekly shopping. Staff educated and promoted healthy eating where possible and people were able to cook fresh meals for themselves with support where appropriate.
- We observed people had access to the kitchen as they pleased, and staff adhered to people's choices and wishes. For example, a person wanted to enjoy a particular meal in the evening and a staff member supported the person to prepare the meal.

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

- We found the premises were clean and tidy.
- People's bedrooms had been personalised with their own belongings, to assist people to feel at home.

- People were not restricted from accessing other parts of the premises and had easy access to the garden. During the inspection, we observed people sitting outside as it was a warm day, which they enjoyed as they were able to socially interact with each other.

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

- People were supported to access healthcare services when required. Care plans contained information about people's health and medical needs and the support they required with this.
- The service worked in partnership with other services and health and social care professionals to ensure people's health were maintained such as diabetes nurse, social worker, specialist nurse, neuro psychologist, occupational therapists and GP.

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 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.

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

- The service did not support anyone currently who was subject to a DoLS authorisation. The registered manager and staff demonstrated a good level of understanding in relation to the MCA, its principles and how this may affect a person that they supported.
- Care plans contained records confirming that people had consented to their care and support.
- Two people lacked capacity to manage their finances and appointees were in place to ensure this was managed safely.
- Observations made during the inspection and records showed people went out and enjoyed various activities and community outings themselves without restriction. The registered manager told us people were able to go out independently and have mobile phones if they needed to call the service at any time.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- People spoke positively about the care they received and indicated positive caring relationships had developed between people and staff. People approached staff with ease and were able to express how they were feeling and what they wanted to do. We observed staff were patient with people, listened and supported people when requested.
- People's equality and diversity needs were detailed in their care plans and accommodated for. For example, a person was supported with their dietary requirements in accordance with their culture.
- Staff had a good understanding of equality and diversity. A staff member told us, "Treating and respecting everyone the same, whatever their beliefs."

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

- Records showed people including healthcare professionals where needed were involved in decisions about their care to ensure they had the support they needed to be able to make informed decisions about their care.
- People were supported to make day to day decisions for themselves and were provided with choice. During the inspection, we observed staff respected people's choices. People could choose where to sit and how to spend their recreational time.
- Resident meetings and keyworker sessions were held with people which provided them opportunities to speak about the service and express what they wanted. Personal goals were put in place which showed actions taken to accommodate people's wishes in relation to their care and daily lives. A staff member told us "I respect [people's] choice if they don't want to do something, but it is my duty to always ask them."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. People were able to spend time in private if they wished to.
- Staff were able to tell us how they maintained people's privacy and dignity. A staff member told us "We respect their privacy when they are in their own rooms."
- Care plans set out how people should be supported to promote their independence. During the inspection, we observed staff provided prompt assistance but also encouraged and prompted people to build and retain their independence where possible.
- Staff understood the importance of promoting people's independence. One staff member told us "We recognise them as individuals and can make a difference to someone with a little help."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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 service supported people to live life as fully as possible and enhanced the quality of people's lives. One person had mental and physical health needs and had lost hope for their future. With the help of their keyworker and their family, the person re-established their passion for music and had started playing in a band. The person had a piano in their room and during the inspection, the person played for us. The person also went to a recording studio to play with their band. The person had a keen passion for acting and also attended drama groups. The person told the service, 'My keyworker was always patient and never judged my choices. I am grateful to the staff here for helping me see that and making this my new reality. It has given me a sense of achievement and a new confidence.'
- The service used innovative ways of involving people, ensuring they were consulted, empowered and demonstrated people were listened to and their opinions were valued in the way the service was run. For example, people expressed wishes to make changes to the garden and grow vegetables. People were involved in the recruitment of the gardener and were involved with designing and planning the layout of the garden, including purchasing equipment and vegetables to grow. People actively maintained the garden and used the garden tables and benches they had painted. People also enjoyed some of their home-grown vegetables such as cucumbers, tomatoes as well as various herbs when cooking their meals.
- The registered manager told us these initiatives have been truly successful, as some people who didn't usually participate in group activities attended and it increased people's confidence, creating a strong sense of community spirit and social inclusion.
- The service played a key role in the local community and was actively involved in building further links by contacting community resources and support networks to promote people's well being and independence. For example, people were involved in a weekly baking group which encouraged people to get together socially to learn and experiment with new cooking skills. At Christmas, people baked their own individual cakes and visited a local homeless centre. People donated their cakes to the centre and found this very rewarding and shared the opinion that it was a "beautiful gesture and hoped it brings happiness." Photographs showed people proudly showing their individually decorated cakes at the centre.
- The service and staff demonstrated an excellent understanding of people's social and cultural individual needs, values and beliefs and went the extra mile to meet these needs. For example, the service held diversity food and cultural days focused on introducing different culinary heritage and cultures to people using the service. Photographs showed people happily participating in such events and people wore cultural clothes. One person was particularly proud of their cultural heritage and liked to prepare and share their cultural food with other people using the service. The service supported the person to purchase their own utensils for this and they enjoyed cooking meals for others. During the inspection, this person told us

they were looking forward to going to a concert that weekend with performances from artists from their cultural background.

- Staff also supported the person with speaking English by ensuring access to an interpreter and supporting them through college. The registered manager ensured a staff member spoke the person's first language to make things easier for them. This meant the person was able to communicate effectively and enabled them to live and socialise independently. The person told the service, 'This improved my social networking as I am able to visit my friends and family frequently.'

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

- The provider tailored its services to meet the needs of people to focus on providing person-centred care and support and achieved exceptional results. For example, a person lived a fully independent life with their family including being able to manage their medical condition. However, their situation considerably deteriorated and when they came to the service, they needed a DoLS authorisation in place due to the support they needed. The service supported the person to manage their situation and medical condition with the support of a dietician, psychologist and social worker. Within a few months, the person was able to do their own shopping, prepare their meals and manage their medical condition themselves and arrange their own appointments. This meant that the person no longer needs a DoLS authorisation in place as they were able to independently live their life as they had done before.

- We noted staff had great empathy with people and to support and enable them to live as full a life as possible. The team leader told us "[Person's] condition used to be overwhelming, but I am proud of them and how far they have come." The registered manager told us the person wanted to move into their own flat which they were now supporting them to do.

- Due to the exceptional way staff and the registered manager had been responsive to people's needs, the service received awards and recognition for their achievements. The service and staff were awarded by Barnet Care Awards, Frontline Leader Award, Carer of the Year and Most Innovative Service 2019. The service was also awarded Richmond Fellowship Enrich Awards for HOPE 2018 and Richmond Fellowship Enrich Awards for Community Involvement 2019.

- Feedback from healthcare professional demonstrated that staff focused on providing person-centred care and support and were very responsive to people's needs. One healthcare professional told us the service was responsive to referrals and visited new people as early as possible, they understood people with complex mental health and gave people chances when many other providers had given up. Another healthcare professional told us the management were, "Brilliant, helpful and very responsive, collaborative and creative in their approach." They said, "The service goes out of their way to support people."

- Healthcare professionals also told us staff were always approachable, friendly and knew people well.

- People using the service had individualised and detailed care plans based on their needs and how they wanted their care delivered. Care plans included details of people's health conditions, preferences and the level of support they required. They were reviewed and updated when people's needs changed.

- People were supported to follow their interests and maintain links with the wider community. People independently enjoyed various activities such as going to restaurants, gym, art groups and day trips in accordance with their choice.

- People were able to visit family and friends, receive visitors and were supported and encouraged with maintaining relationships with people important to them.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's care plans contained information which showed how they communicated and how staff should communicate with them.
- The registered manager told us that no-one required information that needed to be tailored to their individual needs. However, if they did, this documentation would be provided in any format appropriate to the person's needs.
- The service also had a computer for people to use and increase their IT skills. Staff provided IT support for people where needed such as supporting them to complete application forms and send emails. One person using the service was able to book concert and festival tickets online themselves. The registered manager told us they were trialling a system which allowed people to have their own log in account to access information about the service, their care plan and input updates about their skills and interests which would enable them to have as much choice and control of their care and lives as they wanted.

Improving care quality in response to complaints or concerns

- There were procedures for receiving, handling and responding to comments and complaints. Records showed complaints had been investigated and responded to promptly by the registered manager. A person told us "No complaints here. I couldn't ask for more."

End of life care and support

- No one at the service currently received end of life care from the service. However, people's end of life wishes and how they wished to be supported were detailed in their care plans to ensure these could be met.
- The service dealt with this matter in a sensitive and supportive manner with people. For example, one person did not want to talk about their end of life. The service respected this and used alternative ways to encourage the person, at their own pace to find out more about end of life care and choices available for them. The person agreed to meet with somebody from the local hospice to get more information about end of life care plans and how to make a will to decide what they wished to do.

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 Requires Improvement. At this inspection this key question has improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At the last inspection on 17 August 2018, we found systems and processes were not effective to identify and improve the quality of the service. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014.

We asked the provider to take action to make improvements and this action has been completed.

- The provider had an effective system in place to assess and monitor the quality of the service. The registered manager and team leader completed various audits and spot checks covering areas such as health and safety, medicines and finances. The service also used a self assessment tool to efficiently manage quality and compliance and monitor improvement in the service. Where issues were identified action was taken to improve on the quality of the service. Health and safety checks showed water temperatures were within the safe temperature range which was an issue identified at the last inspection.
- Care records had been updated to contain more detail and staff received additional training and support to use the provider's electronic care planning system more effectively.
- The service promoted an inclusive and open culture. Management staff recognised support workers contributions on the way the service was delivered through staff surveys and meetings. Minutes of these meetings showed staff had the opportunity to share good practice and any concerns they had. A staff member told us "The manager knows the residents inside out and treat them as individuals. It is a dream and so easy to work with them. The team leader is the same and happy to take feedback. They are very good as a team leader. Nobody is post rank and all is equal. It all comes from top down and they know what they are doing."
- Staff surveys were conducted for 2018/19 to encourage contributions and involvement from staff. Records showed a workshop was arranged in which staff were able to discuss findings from the survey covering areas such as managing workloads and support to maintain their well being and identifying measures to address any issues raised. A staff member told us "The manager is incredibly approachable and professional."

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

- There was a registered manager in post who knew of their responsibility with regard to the Health and Social Care Act 2014 work and had notified the CQC of any significant events at the service.
- There was an organisational structure in place and staff understood their individual roles, responsibilities and the contribution they made to the service. A staff member told us "She [registered manager] is hands

on. We all work together, learn from her as well. There is an open door policy if we have any issues or need any help, the support is there from the provider as well."

- Healthcare professionals spoke positively about the registered manager. They told us they were an excellent communicator who takes a solution focused approach.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Continuous learning and improving care

- The service engaged and obtained feedback from people through surveys to improve the quality of care and support delivered. Feedback from surveys were analysed to ensure they improved the service where needed. We noted feedback was positive about the service. Comments from people included 'They [Foxlands House] have supported me with all my goals' and 'I am really happy with the service.'

Working in partnership with others

- The service worked in partnership with a number of organisations including local authorities that commissioned the service, other health and social care professionals and community based organisations such as Barnet carers centre, safeguarding service user forum and Westminster Drug Project to provide effective joined up care. A healthcare professional told us the service was able to use positive intervention and work with people with complex needs, including substance misuse issues. They also told us the service was adept at identifying and initiating any issues at an early stage and worked in conjunction with them.

- The service has also put in place a community links officer who is responsible for ensuring people had access to the community in areas they wished to pursue such as education, voluntary work and services to ensure their well being. The community links officer told us "I love working here. I can bring a lot of information to the people here and help them where I can."