Farrington Care Homes Limited

Wellfield House

Inspection report

Manor Road
Catcott
Bridgwater
Somerset
TA7 9HT
Tel: 01278 722405
Website: www.farringtoncare.com

Date of inspection visit: 26 February 2015
Date of publication: 27/03/2015

Ratings

Overall rating for this service	Requires Improvement
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Requires Improvement
Is the service well-led?	Requires Improvement

Overall summary

This inspection was unannounced and took place on 26 February 2015

Wellfield House provides care and accommodation to up to 21 people. The home specialises in the care of older people. The home does not provide nursing care and people who require nursing assistance are supported by the local district nursing team.

There is a registered manager 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.

The registered manager was open and approachable and supported people and staff well. However the registered provider did not take an active role in supporting the

Summary of findings

home or monitoring the quality of the service offered to people. This meant they had no system to assure themselves the manager was managing the home appropriately.

There were limited social activities available in the home but many people said they preferred to occupy themselves. The registered manager told us they continued to encourage people to give ideas for the activities they would like to have arranged.

People told us staff were kind and caring and always respected their privacy and dignity. Several people commented on how helpful staff were. One person said "If you wanted anything they would try their best to get it for you."

People felt well looked after and said the home arranged for them to see healthcare professionals according to their individual needs. Visiting nurses informed us the staff monitored people's health and always asked for advice if they had any concerns.

Care was responsive to people's needs and personalised to their wishes and preferences. People were able to make choices about all aspects of their day to day lives. Staff were aware of how to assist people to make decisions if they lacked the mental capacity to make decisions for themselves.

People were involved in discussions about the care and support they received and were made aware of any risks. The staff responded to changes in people's needs and adjusted care accordingly.

People had a choice of food and staff catered for people with specific dietary needs and preferences. People were happy with the quality of food served in the home and all said portion sizes were ample. People told us "Food is excellent," "Food is always good and there's plenty of it" and "Food is very nice, I've put on weight since I moved here."

Staff had access to on-going training in health and safety and the specific needs of the people who lived at the home. This made sure staff had the skills and knowledge to safely and effectively support people.

There was a robust recruitment procedure which minimised the risks of abuse to people. Staff had received training in recognising and reporting abuse and were confident that any concerns would be fully investigated to make sure people were protected.

People knew how to make a complaint and everyone told us they would be comfortable to do so. All were confident they would be listened to and action would be taken to address any shortfalls. One person said "The manager is a super lady. She said right at the beginning if there is anything that bothers you please tell me. I won't know unless you tell me and then we can put it right."

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.

There were sufficient staff to make sure people received care and attention in an unhurried and safe manner.

People's medicines were safely administered by staff who had received specific training to carry out this task.

There was a robust recruitment process which minimised the risks of abuse to people.

Good

Is the service effective?
The service was effective.

People were supported by staff who had the skills and knowledge to meet their needs.

People received a variety of nutritious meals which took account of their preferences and dietary needs.

People's health was monitored and they had access to appropriate healthcare professionals according to their specific needs.

Good

Is the service caring?
The service was caring.

People told us staff were kind and gentle and always helpful.

People's privacy was respected and they were able to make choices about how their care was provided.

People, or their representatives, were involved in all decisions about their care.

Good

Is the service responsive?
The service was not fully responsive.

Although there was an activity programme in the home, activities were not always arranged in line with people's interests.

The staff responded to changes in people's needs which made sure they continued to be appropriately cared for.

People knew how to make a complaint and were confident any concerns raised would be responded to.

Requires Improvement

Summary of findings

Is the service well-led?

The service was well led by the registered manager but improvements were needed to make sure the registered provider took an active role in monitoring and supporting the service.

People told us they found the registered manager open and approachable. We saw everyone was very comfortable and relaxed with them.

Staff felt well supported by the registered manager which led to a happy relaxed atmosphere for people.

Requires Improvement

Wellfield House

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 26 February 2015 and was unannounced. It was carried out by one adult social care inspector.

Before the inspection visit we looked at information we held about the home. This included information regarding significant events that the home had informed us about and two concerns which had been raised with us anonymously. At the last inspection carried out in May 2014 no concerns relating to the care and support people received were identified.

During this inspection we spoke with ten people who lived at the home, two visitors and two visiting community nurses. We also spoke with four members of staff and the registered manager. Throughout the day we observed care practices in communal areas and saw lunch being served in the dining room.

We looked at a number of records relating to individual care and the running of the home. These included three care plans, medication records, three staff personal files and health and safety records.

Good

Is the service safe?

Our findings

People told us they felt safe at the home and with the staff who supported them. One person told us "The staff treat me properly, they are very kind." Another person said "I do feel safe here. There's nothing to worry about."

Staff told us, and records seen confirmed, that all staff received training in how to recognise and report abuse. Staff spoken with had a clear understanding of what may constitute abuse and how to report it. All were confident that any concerns reported would be fully investigated and action would be taken to make sure people were safe. One member of staff told us "I've never seen anything that gave me cause for concern. If I did I wouldn't hesitate to report it. It would be responded to I am confident of that."

Risks of abuse to people were minimised because there was a robust recruitment procedure for new staff. This included carrying out checks to make sure they were safe to work with vulnerable adults. Staff recruitment files showed all new staff were only offered a job once references had been obtained and a check on their suitability to work with vulnerable adults had been carried out.

People were supported by sufficient numbers of staff to meet their needs in a relaxed and unhurried manner. People told us they never felt rushed and there were always staff available to assist them. One person told us "They never rush you with things." Staff responded to requests for assistance promptly to make sure people received care and support when they needed it. One person told us "If I want anything I ring the bell and they are here in a trice." Throughout the day all requests for support were responded to quickly and we did not hear bells ringing for extended periods.

Care plans contained risks assessments which outlined measures in place to enable people to receive care safely.

One person told us that due to their reduced mobility, the registered manager had discussed with them ways that risks could be minimised. They told us "Everything was discussed with me and we decided to trial a new way. I was unsure at first but now I am very happy with how it has all worked and I feel safe when they help me." Another person told us they often went out without staff supervision and had agreed this with staff. They said they were aware of any risks and always told someone when they were going out and when they would be back.

People's medicines were administered by staff who had received specific training to carry out this task. People told us they had complete confidence in the staff who helped them with their medicines. One person said "I always get the right tablets." Another person told us "They do the tablets at breakfast time and I get the right ones."

There were suitable secure storage facilities to make sure people's medicines were kept safe. The home used a blister pack system with printed medication administration records. All medicines which entered the home were carefully checked to ensure people received medicines in line with their prescription.

Medication administration records clearly showed what medicines had been received into the home and were signed when administered or refused. This gave a clear audit trail and enabled the staff to know what medicines were on the premises. Where people were prescribed medicines on an as required basis, for example pain relief, these were regularly offered to people to maintain their comfort. We looked at records relating to medicines that required additional security and recording. These medicines were appropriately stored and clear records were in place. We checked records against stocks held and found one error in the recording of these medicines which the registered manager said they would investigate immediately.

Good

Is the service effective?

Our findings

People told us they felt well looked after by competent staff. Comments included; "I feel very well looked after here. I get everything I need," "Staff are all very pleasant and efficient" and "Staff are all very good. Moving here was the best thing I ever did." A visiting relative said "I can't fault the care or the staff. In fact I can't fault anything."

People were supported by staff who had undergone an induction programme which gave them the basic skills to care for people safely. Staff told us they had good access to on-going training which included training in health and safety and subjects relevant to the needs of the people they looked after. One member of staff told us they had just completed a course on sensory impairment. They said "It was really relevant to the people who live here and has definitely made me think about my work and how I could better help people." Another member of staff said "Sometimes the training just makes you stop and think about how you do things. It's a reminder and we all need those."

The registered manager arranged for people to see healthcare professionals according to their individual needs. People told us the home was very good if they were unwell and made sure they were referred to appropriate professionals. One person told us "They are quick to get the doctor if you need one." Another person told us they were visited regularly by a community nurse. On the day of the inspection one person was seen by a physiotherapist. Care plans showed people were seen by doctors, nurses, chiropodists, opticians and were supported to attend hospital appointments where needed. One person said "Everything is catered for without having to lift a finger."

Visiting nurses told us the staff were always quick to ask for support if they had concerns about a person's health. They said staff acted on any advice given to make sure people received appropriate treatment.

At lunch time people were able to choose where they ate their meal. The majority of people ate in the dining room and said they enjoyed the company. One person said "I like to stay in my room and don't want to join in activities but I find the mealtimes a sociable occasion so I always make an effort to go down." Another person told us they preferred to eat in their room and staff accommodated this wish.

At lunch time people were given a choice of two meals. They were also offered a selection of drinks including alcoholic beverages for anyone who wished. One person said "I like a glass of sherry with my meal." People were happy with the quality of food served in the home and all said portion sizes were ample. People told us "Food is excellent," "Food is always good and there's plenty of it" and "Food is very nice, I've put on weight since I moved here."

The staff catered for people with specific dietary needs and preferences. There was information about people's likes, dislikes and requirements in the kitchen so anyone cooking and serving meals was aware of people's preferences. One care plan we read stated the person had swallowing difficulties and needed their food and drink to be served at a specific consistency. This information was repeated on a notice in the kitchen. At lunch time we saw this person received their meal and drink as recommended in their care plan.

Staff monitored people's weight and sought advice if this raised concerns about a person's well-being. One person had lost weight and they had been seen by their doctor and a hospital consultant to eliminate any under lying causes and make sure they received the correct treatment.

People were always asked for their consent before staff assisted them with any tasks and were able to make decisions about any treatment they received. One person told us "They always ask you if you agree with things and give you time to change your mind."

Staff had received training and had an understanding of the Mental Capacity Act 2005 (the MCA.) This made sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The MCA provides the legal framework to assess people's capacity to make certain decisions, at a certain time. When people are assessed as not having the capacity to make a decision, a best interest decision is made involving people who know the person well and other professionals, where relevant. Staff told us everyone at the home was able to make day to day decisions and they respected people's choices. They said where people may have to make a complex decision they would involve family members and professionals. This showed staff were working in accordance with the principles of the act.

Good

Is the service effective?

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. DoLS provides a process by which a person can be deprived of their liberty when they do not have the capacity to make certain decisions and there is no other way to look after the person safely. No one who lived at the home was subject to DoLS but the provider had a policy on this legislation and the registered manager was familiar with the local arrangements.

Good

Is the service caring?

Our findings

People told us the staff who worked with them were always kind and caring. One person told us "Staff are kind and always polite." Another person said "Staff are very kind and very gentle." Many people commented about how helpful staff were. One person said "If you wanted anything they would try their best to get it for you."

There was a calm and friendly atmosphere in the home. Professional and personal visitors said they were always made welcome and found the staff to be extremely friendly and helpful. Many people said they thought the size of the home made it feel homely. Two people told us they had chosen the home because they had lived locally and saw it as part of the community. One person said "I've always known the home. I have visited friends here in the past and I didn't really consider anywhere else. Living here means I'm still part of things."

Staff interactions with people were professional and caring. Staff took time to listen to people and to make sure they were always comfortable. One person said "They always have time to listen although I know they are very busy." Throughout the day staff checked on people in the lounge area and in their rooms. We heard staff asking people if there was anything they wanted and offering hot drinks. Staff chatted to people about things that were familiar to them such as family and local events and places.

People made choices about where they wished to spend their time. People were able to move around the home and gardens without restrictions. People who relied on staff to support them to get around were always asked where they wanted to go and were assisted accordingly. Staff walked with people at the persons pace and offered on-going reassurance and encouragement.

Each person had a single room where they were able to see personal and professional visitors in private or spend time alone. People told us their privacy was respected. One person said "They are very respectful and no one ever barges into your room." People were able to personalise their rooms in line with their tastes and needs. One person said they had bought all their own furniture with them when they moved in. They told us "I love my room. It's my little home."

People who required help with personal care said staff were respectful and always treated them with dignity. A hairdresser visited the home weekly which enabled people to continue to take a pride in their appearance. People were well dressed and clean which showed that staff took time to assist them with personal care and their appearance.

There were ways for people to express their views about their care. People said they were fully involved in all decisions about how their care was provided. Visiting relatives told us they had been involved in creating care plans and were always kept informed about anything which happened in the home. People were able to express their views on an on-going basis. One person said "It depends how I feel each day. Whenever I ask for help they are happy to assist me. They know how I like things done too."

Staff were aware of issues of confidentiality and did not speak about people in front of other people. When they discussed people's care needs with us they did so in a respectful and compassionate way.

Requires Improvement

Is the service responsive?

Our findings

People received care that was responsive to their needs and personalised to their wishes and preferences, but improvements were needed to make sure people had access to activities in line with their interests and hobbies.

There was a weekly activity programme on display in the main entrance hall to enable people to choose what activities they wished to take part in. There was no evidence that activities had been arranged in line with people's interests. People gave mixed responses about the level of activity in the home. One person told us they very much enjoyed the music sessions and bingo and another person said they would like there to be more quizzes. However several people said they preferred to occupy themselves and did not wish to join in with any organised activities.

During the inspection there were limited activities available for people to join in with. We did hear a member of staff asking people if there was anything they would like to do but most people declined. The member of staff told us they asked people about activities every day but the response varied. Two people told us they did not spend time in the lounge because the TV was always on. During the inspection the TV was on although no one was watching it. At lunch time one person got up from the table and turned it off which seemed to be appreciated by several people.

People were able to make choices about their day to day lives. One person told us "You can please yourself." Another person said "No one has ever told me when to go to bed but they always give me a shout when breakfast is ready which is useful."

The registered manager carried out a full assessment of people's needs before they moved to the home. This assessment included details about the person's health and their preferred routines. From the assessment a care plan was drawn up to make sure all staff knew how to meet the person's needs. People told us they, or their representatives, had been involved in writing the care plan. One person said "They discuss everything with you." A visiting relative told us "There's a care plan about how things will be managed. We all agreed it together and it's been very successful."

In addition to full time residential care the home also offered day care and respite care. This gave people an opportunity to spend time at the home and get to know other people who lived there. It also enabled them to decide if Wellfield House was the right place for them. One visitor told us their relative had originally stayed at the home for a two week holiday. They told us "It was outstanding and we all knew it was the right place."

Care plans were personalised to each individual and contained information to assist staff to provide care in a manner that respected their wishes. Care plans also contained basic life histories for each person to make sure staff knew about their lifestyle choices and what was important to them. Staff had a very good knowledge of each person and were able to tell us about people's preferences. One member of staff said "We spend time getting to know people and the things that make them happy. We just adapt to each person and what they want. They never have to fit in with us, we have to fit in with them.

Staff responded to changes in people's needs. One person told us how the home had adapted how they supported them in line with their changing mobility needs. They told us "It's difficult not being able to do things for myself but the girls are very good and just give me extra help when I need it. There's never a fuss." A visiting nurse told us the staff made sure people got the support they needed when they had concerns about any changes in a person's health.

The registered manager sought people's feedback on an on-going basis. People told us they saw the registered manager every day and they always asked them if they were happy with everything. People said they would not hesitate to speak with the registered manager or a member of staff if they had a complaint about their care. One person said "The manager is a super lady. She said right at the beginning if there is anything that bothers you please tell me. I won't know unless you tell me and then we can put it right." Another person said "I'd complain if I needed to. They would listen and sort things out. I'm confident of that."

Requires Improvement

Is the service well-led?

Our findings

The registered provider did not take an active role in supporting the home or monitoring the quality of the service offered to people. The registered manager had put in place basic checklists to make sure the environment and practice were regularly monitored. However the provider did not carry out any quality monitoring visits to ensure people were receiving an appropriate level of care or to monitor the practice of the registered manager. The registered manager told us the nominated individual had only visited the home once in the past 12 months. They had not carried out any formal monitoring of the service or made any recommendations to make sure the service continued to respond to people and ensure on-going improvements.

The provider did not make sure the registered manager received regular supervisions or appraisals meaning they received limited support or feedback on their performance. Supervisions are an opportunity for staff to spend time with a more senior member of staff to discuss their work and highlight any training or development needs. They are also a chance for any poor practice or concerns to be addressed in a confidential manner. The registered manager told us they had received a telephone supervision with a senior member of staff within the company in February 2014. From this actions for them to take, with timescales, had been recorded. The registered manager had received no further supervision sessions and there had been no checks to ensure that actions set had been complied with.

The registered manager was very open and approachable. The main office was located by the entrance which meant they were easily available to people who lived at the home and visitors. During the inspection the registered manager spent time in the main areas of the home talking with people and we saw people and visitors went to the office to chat with them. Everyone was very comfortable and relaxed with the registered manager and they had an excellent knowledge of people and their needs and wishes. People told us there were lots of opportunities to speak with the registered manager. One person said “She’s always here. Always ready for a chat.” Another person told “She’s very approachable.”

The registered manager said their aim was to create a homely environment where people were able to live their lives with the support of staff where needed. Their vision and values were communicated to staff through staff meetings and on-going monitoring of practice. The minutes of one staff meeting showed that the importance of enabling people to make choices was discussed, particularly in relation to what time people went to bed. A member of staff said “I think we all work in a way that treats people fairly and makes sure they are safe. But’s it their home not ours and we have to remember that.” However the provider did not monitor the manager’s aims, visions and values to make sure it was in line with their own visions and to ensure the manager achieved them.

Staff felt well supported by the registered manager which created a warm and friendly atmosphere for the people who lived at the home. All staff received formal supervision and annual appraisals had been introduced. Staff said they could discuss any issues at any time not just during their supervision. One member of staff said “If we have any suggestions for how to improve things she is always keen to listen.” Another member of staff said “The manager is always happy and friendly. They make sure there is a professional but homely atmosphere.”

To make sure people received quality care from staff who were experienced and knowledgeable there was a small team of senior carers. There was always a senior carer on duty who was able to offer advice and support to less experienced staff. The registered manager worked full time at the home and was always on call outside their working hours. One member of staff said “You can get hold of her on the phone and she will always come in if you need help.”

As well as day to day discussions with staff and the registered manager, people had opportunities to give feedback using satisfaction surveys. The last survey was carried out in July 2014 and showed a high level of satisfaction with the quality of the care people received. Feedback about activities was not so positive with only three of the 14 people who responded saying they were fully satisfied in this area. The registered manager told us they continued to encourage people to give ideas for the activities they would like to have arranged.

The home has notified the Care Quality Commission of all significant events which have occurred in line with their legal responsibilities.