

Sunderland City Council

Farmborough Court Intermediate Care Service

Inspection report

Farmborough Court, Brentford Avenue
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Farmborough Court Intermediate Care Service is a purpose-built care home and provides short term rehabilitation for up to 56 people. There are four units within the service, we inspected the Clarence and Buckingham units as the remaining two were empty. At the time of the inspection 26 people were using the service.

This service offers short term rehabilitation usually for up to six weeks, to people who have been discharged from hospital or whose needs have changed.

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

Staff were safely recruited and received an induction followed by training from the provider. Training was monitored and staff were supported with regular meetings and supervisions. Staffing capacity was enough to meet service user needs.

People and their relatives were very positive about the care provided. People told us they felt safe and staff had the skills to support them. Relatives provided positive examples of how staff had helped improve people's lives since moving to the home.

The manager had an effective quality assurance system in place. Regular audits and checks were done. These were used to identify relevant action and lessons learnt. People, relatives, staff and professionals were offered opportunities to provide feedback about the care provided at the home.

The service was following safe infection prevention and control procedures to keep people safe. Medicines were managed safely. Risks to people were assessed and action taken to reduce the chances of them occurring. The manager acted on feedback immediately. People were safeguarded from abuse.

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

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

Rating at last inspection and update

The last rating for this service was good (published 6 September 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 COVID-19 and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Farmborough Court Intermediate Care Service on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our well-led findings below.

Farmborough Court Intermediate Care Service

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 Health and Social Care Act 2008.

Inspection team

1 inspector carried out this inspection.

Service and service type

Farmborough Court Intermediate Care Service is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Farmborough Court Intermediate Care Service is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. The manager intends to begin the application process in the near future.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke to a team leader, 1 person, 2 relatives and 2 members of staff. We reviewed a range of records. This included 4 people's complete care records and medication records for 4 people. We looked at 4 staff files in relation to recruitment and staff supervision as well as staff feedback forms. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Policies and procedures were in place for staff to follow.
- Staff had received training on identifying and reporting abuse and knew what action to take if they identified abuse. One staff member said, "If I felt something needed to be reported I would do so instantly, I have not had to do this."
- People told us they felt safe when receiving their care. One relative told us, "The staff are very careful with [person], I trust staff to keep them safe."

Assessing risk, safety monitoring and management

- People were kept safe as risks to people and within the environment were assessed regularly and mitigated.
- Risks associated with the safety of the environment and equipment were identified and managed appropriately. Regular health and safety checks were undertaken by staff responsible for the maintenance and safety of the premises. This ensured that people were supported to use equipment that was safe.

Staffing and recruitment

- Staff were recruited safely and there was enough staff to safely support people.
- New staff had appropriate pre-employment checks in place which included requesting references and a Disclosure and Barring Service (DBS) check before they were employed. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staffing levels were regularly reviewed against people's support needs.

Using medicines safely

- Medicines were managed safely. The manager carried out regular checks on people's medicines to make sure they were being administered in line with national best practice, the provider's policy and prescribing instructions.
- Staff had received training in administering medicines and had their competencies assessed regularly, we were assured staff were competent in all aspects of medicine management.
- Medicines were labelled with directions for use and contained both the expiry date and the date of opening. Medicines were safely stored in locked cupboards or lockable fridges if required.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- The manager ensured relatives were able to visit loved ones, in line with current guidance.

Learning lessons when things go wrong

- Lessons were learned from incidents and learning was shared with the staff team to prevent similar incidents occurring.
- Accidents and incidents were fully investigated and outcomes from these were used to improve the care provided.

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive staff culture which helped to achieve good outcomes for people. One staff member said, "I enjoy working here, everyone is willing to help each other."
- The manager communicated with people, relatives, and staff. Relatives told us the management team were approachable. One relative commented, "I've always been kept up to date with [person's] progress, they tell us everything we need to know."

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

- The service had a duty of candour policy, and the provider understood their responsibility to be open and honest if something went wrong.
- Results from investigations, feedback sessions and audits were used to improve the quality of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to the commission for significant events that had occurred at the service, for example accidents and incidents.
- The manager undertook a range of audits to assess care quality and safety such as supervisions, care plans, environmental risk assessments, rostering and welfare checks on a monthly basis.
- Staff feedback was mixed regarding confidence in the management team. They told us, "I don't feel very supported as my workload is very big, I feel my suggestions aren't always listened to," and "The team leaders are supportive, I can go to them if I have any problems."

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

- The provider held team meetings with staff where their views were heard, these included meetings for care staff, senior staff and management.
- A resident's satisfaction survey had been completed in 2021. Feedback was positive and we saw the provider had taken on feedback and suggestions made as part of the survey.

Working in partnership with others and continuous learning and improving care

- Staff worked in partnership with people, relatives and other healthcare professionals.
- Care records showed involvement from other agencies and staff had used the advice/guidance provided to help with people's care planning.
- The service had a quality assurance system which was used to identify positive practice as well as areas for improvement.