

Mrs J Soobrayen

# Faldonside Lodge

## Inspection report

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Date of inspection visit:  
16 May 2017

Date of publication:  
05 July 2017

### 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 ●

# Summary of findings

## Overall summary

Faldonside Lodge provides accommodation and care for up to 15 people, many of whom are living with dementia. At the time of our inspection there were 13 people living in the home.

There was a registered manager in the home. 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.

At the last inspection, the service was rated Good. At this inspection we found the service remained Good.

### Why the service is rated Good

People were treated in a kind and caring way at Faldonside Lodge and were consistently involved in the planning and reviewing of their care. People's privacy and dignity was consistently upheld and there were no restrictions placed on when people could have relatives or friends visit them.

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.

Individual risks to people and within the environment were consistently assessed and steps had been taken to mitigate these risks. There were consistently enough staff to support people.

People's medicines were managed and stored in a safe way and people received their medicines as prescribed.

Staff were supported through regular supervisions and by having access to a variety of courses which would develop their skills and knowledge within their role. Staff ensured that people maintained a healthy dietary intake and people had their preferences catered for. People were able to access relevant healthcare professionals when needed.

There were regular quality satisfaction surveys to gain people's feedback about their care and treatment. The registered manager involved people living in the home and the staff in discussions about how the service could be improved.

Further information is in the detailed findings below

## 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 remains Good

### Is the service effective?

Good ●

The service remains Good

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service remains Good

### Is the service well-led?

Good ●

The service remains Good

# Faldonside Lodge

## **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 checked 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 16 May 2017 and was unannounced. The inspection team consisted of one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

As part of the inspection, we reviewed the information available to us about the home, such as the notifications that they had sent us. A notification is information about important events which the provider is required to send us by law. Prior to the inspection, the provider also 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.

During the inspection we spoke with seven people who lived in the home and the relatives of two people. We also spoke with five members of staff, the registered manager, the team leader, two care assistants and a member of kitchen staff. We checked three people's care records and the medicine administration records (MARs) for three people. We also looked at information relating to how the service was run. This included health and safety records, staff recruitment and training files and a number of audits.

# Is the service safe?

## Our findings

The service remains safe. People we spoke with told us that they felt safe living in Faldonside lodge. One person explained, "Oh, yes, I do feel safe here. Everybody is so kind. If I need help I know I can get it." Another person commented, "I am safe here and I am very comfortable here and never have any concerns."

Individual risks to people were assessed, monitored and managed. Staff understood what constituted abuse and were able to tell us what procedures they would follow if they had any concerns that a person was being abused. We also noted that there was information about the local safeguarding team displayed on a noticeboard in the home. There were risk assessments and guidance in people's care plans which set out how to minimise people's individual risks. For example, one person was at high risk of falls. Their risk assessment stated that they should use a walking aid when mobilising.

Risks within the environment were managed and the registered manager carried out regular audits across all areas of the home. This included health and safety audits and keeping the risk assessments for the home under constant review. We noted that the fire safety risk assessment and policy had been recently updated. In addition to this, all utilities in the home were regularly serviced as was and equipment used for lifting people.

There was a system to record accidents and incidents and this documented what aftercare the person had received.

The staff rotas showed that there were enough staff on duty to support people in a safe way. People we spoke with told us that staff responded promptly when they called for help. We saw during our inspection that staff responded quickly when someone rang their call bell.

Safe recruitment practices were in place and staff had received a satisfactory check from the Disclosure and Barring Service (DBS) before they started working in the home. Appropriate references had also been sought. This helped to ensure that staff were safe to work in a caring environment.

People's medicines were managed in a safe way. We checked three people's medicine administration record (MAR) charts and saw that people received their medicines as prescribed. This was because there were no gaps where staff signed to say that people had been given their medicines. People we spoke with told us that they received their medicines on time. One person commented, "[The staff] are very good with my tablets." We checked the stock levels of some people's medicines and found these to be correct.

Staff we spoke with told us that they received training in the safe management of medicines and training records confirmed this. The registered manager had also developed a comprehensive checklist for assessing staffs' competency in giving people their medicines. This was in addition to the regular observations the registered manager made of staffs' practice in this area.

## Is the service effective?

### Our findings

The service remains effective. People we spoke with told us that they thought that the staff were well trained to carry out their work. One person explained, "The staff here certainly know what they are doing when they care for me. They are always so thoughtful and are always careful to ask if it's all right when they do things for me." Staff completed both online and practical training such as moving and handling and fire safety. We saw from staff training records that staff training was up to date. Staff we spoke with told us how they were encouraged to complete further training such as their level two and three in social care. A number of staff had already completed this training.

All new staff completed an induction period when they first commence their role at Faldonside Lodge. Staff told us that they were further supported through regular supervisions and appraisals.

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 who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We saw that the home was working within the principles of the MCA and that appropriate applications had been made where people needed to be deprived of their liberty for their safety. We also saw from people's care records that best interests assessors were consulted when an application was made to deprive a person of their liberty. This was in addition to the person's family.

Staff were clear about the principles of the MCA and understood the importance of gaining people's consent to care and treatment. People we spoke with told us that staff would always ask for their consent. One person told us, "[The staff] understand my needs and they always ask before they do anything for me."

People we spoke with were complimentary about the food, and their preferences were met. One person told us, "The food here is really good and they always do a special breakfast for me with all the trimmings which sets me up for the day, particularly as I like it earlier than everybody else." People had a choice of meals and told us that they were consulted about what food they liked. One person commented, "The food is absolutely lovely here and if I prefer something else then they will always try and make sure that I can get it." Some people were on special diets and the member of kitchen staff we spoke with knew people's individual dietary requirements. They added that the registered manager would go to great lengths to get food in that people enjoyed. For example, they told us the registered manager would bring back food from London for two people who found it difficult to get their choice of root vegetables in this county.

Prompt referrals were made to relevant healthcare professionals where there were concerns about a person's health. One person told us, "I am very lucky as I can see the doctor whenever I need one which makes me feel happier."

# Is the service caring?

## Our findings

The service remains caring. All of the people and their relatives we spoke with told us that they felt cared for. One person told us, "The care I get is excellent and cannot fault it. Nothing is too much trouble for the staff and they are all so thoughtful. They are all very polite and courteous." Another person commented, "The care I get here is wonderful. This is the best care in Norfolk. The staff here are wonderful. They are polite and friendly and are always smiling."

Throughout our inspection we saw that staff treated people in a kind and compassionate manner. One staff member told us, "I try to give everything. I try to make people happy." We saw one member of staff offer people a drink, when only one person replied 'yes' they told the member of staff not to bother as they did not want to trouble them. We saw the member of staff reassure them that getting a drink was not too much trouble and that the person should never feel like they are troubling staff. We saw that staff had time to sit and speak with people. One person commented, "[The staff] always chat with me which I enjoy."

People's care plans detailed their individual care and support needs. People we spoke with told us that they had been involved in planning their care. One person told us, "Before I came here I was fully involved in the plan for my care. It was all very straightforward."

People were able to choose what they wanted to do and how they liked their care to be delivered. One person we spoke with told us, "I can choose what I want to do but I am a bit limited by my lack of sight and my lack of mobility." People were supported to be as independent as possible and some people had walking aids to help them mobilise independently. We saw one person who used a walking frame being supported by a member of staff. They were patient and encouraging towards the person.

People's dignity and respect was consistently upheld. We saw that one person was gently and discreetly encouraged to eat by a member of staff. This was because the person had not been eating much recently and staff were aware of the person's need to maintain a healthy intake of food. Staff would knock on people's doors and wait for an answer before entering. We also saw that staff closed doors when assisting people with their personal care.

People were able to have visitors without restriction. We saw throughout our inspection visit that people's relatives and friends were welcomed by staff.

## Is the service responsive?

### Our findings

The service remains responsive. People we spoke with told us that staff knew their likes and dislikes. One person commented, "When I came here, I had a long questionnaire to fill in so [the staff] understood my preferences." Another person explained, "[The staff] are very good at understanding what you like and what you don't like and they make sure I am happy with everything."

Prior to living in Faldonside Lodge, people had a pre admission assessment. This meant that the registered manager could be sure that they could meet people's care needs. People's care records were reviewed and updated regularly. People's care plans and associated risk assessments gave staff detailed guidance on how best to support people according to their individual needs. For example, two people preferred to eat large meals later in the evening, this was part of their culture. A member of the kitchen staff told us that they catered for this as they wanted people to feel like it was their home.

The registered manager told us that they had recently transferred people's care records on to a computer based system. They added that they trialled this with one person first to see how reviewing care records with people and their family worked when looking at care records electronically. There was a computer set up in the medicines office and this allowed for people and their relatives to view records in a confidential space. We saw that the registered manager had paper copies of people's care plans and risk assessments stored in the medicines office. They told us that this was so people could take their personal information to hospital with them or these records could be handed to ambulance staff in case of an emergency.

People were supported to maintain their interests and we saw during our inspection visit some people playing a board game with a member of staff. We also saw one person having a manicure done by a member of staff. Some people were able to have a walk into the local town without staff support. One person told us, "I can go into the town and do what I want which is really nice." The registered manager told us that they would hold events where people's family and friends could attend. They told us that they hosted a fireworks night and summer barbecues.

We saw that there were regular meetings for people who lived in Faldonside Lodge. This gave people the opportunity to become involved in how the service is run and to be informed of any changes.

The service had a complaints procedure in place and this was displayed throughout the home. The home had not received any complaints since their last inspection and people told us that they would feel comfortable in raising a complaint if needed. One person we spoke with commented, "I have no complaints at all, everything is perfect." This view was voiced by a number of other people and their relatives.



# Is the service well-led?

## Our findings

The service remains well led. People we spoke with told us that they were happy living in Faldonside Lodge. One person commented, "I am happy here, everything is perfect in the home. The manager always goes the extra mile." Another person told us, "I am very happy here, everybody thinks about the residents and what they need. The manager is very good." The registered manager commented, "I would look after the residents how I would expect my family to be looked after."

Throughout our inspection visit we saw that the registered manager was a visible presence and worked with the staff team to support people who lived in the home. They told us, "I have always told staff that residents come first in any situation." Staff members we spoke with told us that the registered manager was approachable and supportive. Staff we spoke with told us that the registered manager asked them what they needed from management in terms of how they can be better supported in their role. They added that the manager was open with any information that affected the running of the home.

The registered manager understood what notifiable incidents they needed to report to CQC. A notification is information about important events which the provider is required to send us by law. Any notifications were sent to us in a timely manner and contained detailed information.

There were systems in place to monitor and assess the quality of service being delivered. People we spoke with told us that they were given a satisfaction survey every six months. One person explained, "We get regular checks to make sure we are happy with everything and if we think [the staff] could make any changes." The registered manager told us, "I like to promote excellence in all areas. I like to get all the staff involved to see how we can overcome any difficulty." We saw from meeting records that the manager fed back the results of any quality surveys to staff and documented what action needed to be taken to improve the service.

The registered manager carried out a range of audits within the home. People's care records were regularly audited. The registered manager told us that they were able to monitor the quality of people's care records via the computerised system. This would show when people's care records were due for a review. They would then check that staff had completed the review. In addition to this, regular audits were carried out in relation to health and safety, infection control and risks within the environment.

The registered manager told us that they would keep up to date with current legislation and guidance. They told us, "I like challenges, I like to see results." They went on to say that they attended regular meetings for registered managers in the local area. They explained that this was a useful forum for exchanging ideas and seeking support.