

Franklin Homes Limited

Fairways

Inspection report

119 Cardigan Road Bridlington North Humberside YO15 3LP

Tel: 01262676804

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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? | Good |
| Is the service well-led? | Good |

Summary of findings

Overall summary

What life is like for people using this service:

People living at Fairways told us they were happy with the service they received. Everyone we spoke with said they enjoyed living at Fairways and were supported to have a meaningful everyday life. Staff encouraged people to be independent and promoted them to develop and maintain relationships with family and friends.

Care and support was tailored to each person needs and preferences and people were involved in developing their support plans. People had good access to support from health care professionals and the service was pro-active in recognising when interventions were required to ensure a person's wellbeing.

People who lacked capacity were supported to have maximum choice and control of their lives. Policies and systems supported them in the least restrictive way possible.

People were supported to take positive risks and detailed risk assessments supported them to remain safe. Staff understood how to safeguard people from harm and abuse. The staff team empowered people to make choices about what they wanted to do, when they wanted to do it.

Appropriate recruitment checks were carried out. Checks included staff's previous employment, references and Disclosure and Barring Service checks (DBS). These checks helped to ensure people were supported by staff who were suitable to work in a care service.

Medicines were managed and administered safely. Records confirmed people had received their medicines as prescribed. Training records showed medication training was completed annually and regular competency checks were completed by the registered manager

The registered manager demonstrated a commitment to providing person centred care for all people. People knew the registered manager and told us they trusted them. Staff felt the registered manager was supportive and approachable. Relatives we spoke with only had positive comments to say about the service.

Rating at last inspection: Good (Report published March 2016)

About the service: Fairways is a residential care home that was providing personal care to ten people with learning disability, aged 25 and over at the time of the inspection. The service is a care home for up to 12 adults with a learning disability and/or autism.

The service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with a learning disability were supported to live as ordinary a life as any citizen.

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service improved their rating to good overall at this inspection.

Follow up: We will continue to monitor intelligence 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.

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 findings below. | |
| Is the service effective? | Good • |
| The service was effective | |
| Details are in our findings below. | |
| Is the service caring? | Good • |
| The service was caring | |
| Details are in our findings below. | |
| Is the service responsive? | Good • |
| The service was responsive | |
| Details are in our findings below. | |
| Is the service well-led? | Good • |
| The service was well led | |
| Details are in our findings below. | |
| | |



Fairways

Detailed findings

Background to this inspection

The 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.

Inspection team: Two inspectors visited on the first day of the inspection. On the second day there was 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.

Service and service type: Fairways is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. They and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: The inspection was unannounced.

What we did when preparing for and carrying out this inspection:

We reviewed information we held about the service, such as notifications we had received from the provider, information from the local authorities that commissioned services with the service and Healthwatch England. Notifications are when providers send us information about certain changes, events or incidents that occur within the service. Healthwatch England is an independent service which exists to speak up and publicise the views of local people in health and social care settings. Before the inspection, we reviewed the Provider Information Return (PIR) that the provider completed. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection, we spoke with five people who used the service and two relatives to ask about their experience of the care provided. In addition, we spoke with a health professional. We spoke with four

members of staff including the registered manager, senior care workers and care workers. We reviewed a range of records. This included three people's care records and medication records. We also looked at three staff files and records relating to the management of the home.



Is the service safe?

Our findings

People were safe and protected from avoidable harm.

Safeguarding systems and processes

- Staff could explain what action to take to ensure people were safe and protected from harm and abuse.
- The provider had a safeguarding policy in place. Safeguarding concerns had been reported and acted upon, involving all relevant professionals when appropriate.
- People and their relatives told us they felt the service was safe comments included, "I like it here and I feel safe. I like the helpers too" and "I do feel that [my relative] is safe there. The staff are approachable, amenable and very good at their jobs."

Assessing risk, safety monitoring and management

- We discussed the refurbishment work needed to the environment with the registered manager. They told us the provider had a plan in place to make improvements where needed.
- Equipment and utilities were checked to ensure they remained safe for use. Fire risk assessments were in place and weekly checks on the fire safety system were completed.
- Care plans contained appropriate assessment of risks to people. They provided instructions to staff to reduce the likelihood of harm to people when being supported.
- Positive behaviour plans supported people with challenging behaviour. Where possible people created their own positive behaviour plans with support from staff.

Staffing levels and recruitment procedures

- There were enough staff on duty to support the needs of people and keep them safe.
- Appropriate recruitment checks were conducted prior to staff starting work, to ensure they were suitable to work with vulnerable people.

Using medicines safely

- Medications were managed safely. Records confirmed people had received their medicines as prescribed.
- Staff responsible for supporting people with medicines completed annual training and received regular competency checks.
- There were regular checks of the medicines in stock and any discrepancies identified were explored and resolved.

Preventing and controlling infection

• Personal protective equipment (PPE) was available for staff, such as disposable gloves to use to help prevent the spread of infection. We discussed the storage of PPE with the registered manager, to reduce the

risk of people inadvertently ingesting PPE. The registered manager acted straightaway to relocate this equipment.

• Staff were observed using good infection control and prevention practices.

Learning lessons when things go wrong

- Records showed risk assessments and care plans were reviewed following incidents.
- The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.



Is the service effective?

Our findings

People's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on best available evidence.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's assessments were detailed and reviewed consistently.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.
- Care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected.

Staff skills, knowledge and experience

- Staff completed regular training to support them to fulfil their role.
- New staff received a thorough induction and shadowed more experienced staff until they felt confident to work alone.
- Staff told us they were supported by the registered manager who completed regular supervisions, team meetings and competency checks.

Supporting people to eat and drink enough with choice in a balanced diet

- People were involved in meal choices and supported to maintain a balanced diet. One person told us, "We do get a choice of meal every day. I am having salad for lunch today. I can change my mind if I want to as we get offered two different things."
- Meals were presented nicely and adapted equipment was used to maintain people's independence at meal times.
- When required people's nutritional and fluid intake was monitored and professional advice was sought to support maintaining a healthy diet.

Healthcare support

- The registered manager worked closely with health care professionals and arranged support for people when it was required. A health professional told us, "The staff are very good. They understand people's specific needs."
- Records showed people had hospital passports in place. Hospital passports are communication tools to inform other health services and professionals of people's health needs. These were written in detail and provided information on how to care for people in a person-centred way.

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

- People's own rooms were decorated to their individual choice and people had been involved in decorating the service to make it homely. For example, people had their own photographs on display of their memories of holidays and activities
- The garden area was currently being redesigned by people with support from staff to create an area for all people to enjoy.

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 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 with appropriate legal authority. 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 and whether any conditions on authorisations to deprive a person of their liberty were being met.

- People were involved in decisions about their care and staff showed understanding of what they needed to do to ensure decisions were made in people's best interests.
- Where people lacked capacity had capacity assessments completed and records were kept of the decisions made in people's best interests.
- Where required the service had made the appropriate referrals to the Local Authority for people to be assessed for DoLS.



Is the service caring?

Our findings

The service involved and treated people with compassion, kindness, dignity and respect.

Ensuring people are well treated and supported.

- Care plans contained 'life histories' which supported staff to build positive relationships with people.
- Staff were friendly and polite. Interactions between staff and people were natural and showed positive relationships had been developed.
- A relative that we spoke with told us, "Its friendly and homely. My family member has been there ten years now and is very settled. I am comfortable with them being there. The Staff are dedicated and my family member does have their favourites amongst the staff, but I admire them all for the great work that they do for my family member and for all the residents."

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

- People were involved in developing and reviewing their own care plans and worked with staff to provide specific details on how they wished to receive support.
- Regular meetings were held with people and relatives to involve them in planning all areas of care delivery.
- Staff positively welcomed the use of advocates. Advocates represent the interests of people who may find it difficult to be heard or speak out for themselves.
- People's diverse needs were recorded in detail and staff we spoke with demonstrated a good knowledge of people's personalities and individual needs, and what was important to them.

Respecting and promoting people's privacy, dignity and independence.

- People were encouraged to be as independent as possible and they accessed the local community. One person told us, "Staff are nice. They leave me be when I want them to. I'm off to buy some Christmas cards this afternoon."
- People could spend time the way they wanted. They had formed relationships with each other and we observed staff supporting these relationships by using specific communication methods, to aid conversations between people.
- Staff respected people's right to privacy and confidentiality.
- People were treated with dignity and staff were fully aware of their diverse needs.



Is the service responsive?

Our findings

People received personalised care that responded to their needs

Personalised care

- Care plans were person centred, written in detail and reviewed on a regular basis.
- People were involved in creating their own care plans to guide staff on how they wanted their needs to be met. One person had received support from a company psychologist which informed staff how they wished to be supported when they felt anxious.
- The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. We found the service had met this standard.
- There were opportunities for people to take part in activities within the service. A designated area provided art equipment, games and assistive technology for them to access at any time. People told us, "I choose what I want to do each day depending on my mood" and "There's always something happening, we went to the Fireworks the other night and it was really good."
- Staff spent time with people finding out what they wanted to do. People were supported to go on holidays, attend services and groups within the local community. Staff understood the importance of supporting people to be socially included and prevented from social isolation.
- People were supported to access paid employment and had opportunities for education and voluntary work.
- People who were able completed their own positive behaviour assessments and decisions about all aspects of their life and provided information to staff on how they wished to receive their support
- Staff understood what was important to people and supported them to maintain relationships with their family and friends.
- People in the service were actively encouraged by staff to support them in their daily tasks.
- •□People told us they enjoyed cooking and cleaning. One person said, "I enjoy cooking."

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure displayed in the service for people and visitors to refer to in an accessible format.
- Where complaints had been made, they were responded to in line with company policy.
- People and their relatives told us they were confident if they had any complaints the registered manager would address them appropriately.

End of life care and support

• People's end of life care preferences were written in detail in their care plan. This provided staff with information to ensure people would receive dignified, comfortable and pain free care at the end of their life if required.

• Staff supported people with bereavement where needed.



Is the service well-led?

Our findings

Leadership and management assured person-centred, high quality care and a fair and open culture

Provider planned for and promoted person-centred, high-quality care.

- The registered manager demonstrated a positive culture and promoted a high standard of person centred care and support for people.
- People and their relatives spoke positively about the management of the service. Comments included, "[Registered manager name] is the manager. She's lovely. She is dead easy to talk to, I get on well with them", "The manager is my friend" and "They are very approachable. From my point of view, I think they do a marvellous job."
- Staff said they felt supported by the registered manager and received regular supervisions and staff meetings to promote their development.
- The registered manger felt supported in her role. Regular management meetings with the provider supported them to keep up to date with best practice and company procedures.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager understood their legal responsibility to notify the CQC about incidents that affected people's safety and welfare; records showed they had done so accordingly.
- •Systems and process were in place to oversee the service and governance systems drove improvements in the quality of the service.
- The registered manager completed monthly audits to identify any issues or trends within the service. Where concerns or trends were identified, detailed action plans were put in place and communicated to the staff team.
- Staff were clear about their individual roles and were accountable for their actions.

Engaging and involving people using the service, the public and staff

- People, relatives and visiting professionals had completed surveys of their views and their feedback had been used to continuously improve the service.
- Links with outside services and key organisations in the local community were well maintained to promote independence and wellbeing for people. Church groups and local schools visited the service to partake in social activities with the people living at the service.

Continuous learning and improving care

- Systems were in place to ensure the service was consistently monitored and quality assurance was maintained.
- Staff were focused in developing their skills. Supervisions contained clear objectives to support staff with

their continuous learning.