

The RAF Association (RAFA)

Flowerdown 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?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Flowerdown House is a hotel which offers short breaks to serving or ex armed forces personnel and their families. The service provides accommodation for up to eight people with care needs in specific bedrooms. During our inspection there were four people staying at the service. It was changeover day, which meant that some guests were leaving after their stay and others arriving. The property is a large detached house on the sea front.

At the last inspection, the service was rated Good.

At this inspection we found the service remained Good.

Why the service is rated good:

Staffing levels were safe to meet people's needs. The staff team were well established and were skilled at making new relationships with people. Staff were kind, caring and respected people's privacy.

Medicines were stored and administered safely. Risk assessments were in place to support people safely whilst ensuring people's independence was retained. Staff were knowledgeable about how to safeguard people from abuse.

Staff had effective induction, training and supervision. People's health needs were met and people had benefited from attentive staff who referred matters when needed to other health and social care professionals.

Pre-assessment information and care records gave clear guidance to staff of how people preferred to be supported. Feedback was sought from people and actions taken as a result.

Systems were in place to monitor and improve the quality of the service. The service was well run and managed. Staff worked effectively as a team and felt valued and supported. Positive feedback was received about the registered manager from people and staff.

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 remained Good.

Is the service effective?

Good ●

The service remained Good.

Is the service caring?

Good ●

The service remained Good.

Is the service responsive?

Good ●

The service remained Good.

Is the service well-led?

Good ●

The service remained Good.

Flowerdown 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 comprehensive inspection was carried out on 9 May 2017. The inspection was carried out by one inspector and was unannounced.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we had about the service including statutory notifications. Notifications are information about specific events that the home is legally required to send us.

During the inspection we spoke with three people visiting the hotel and four members of staff. We looked at five people's care and support records and three staff files. We also looked at records relating to the management of the service such as incident and accident records, meeting minutes, recruitment and training records, policies and audits.



Our findings

The service was safe. One person said, "Take my word for it. It is wonderful here."

The provider had policies and procedures in place for safeguarding vulnerable adults. This contained guidance on what staff should do in response to any concerns identified. Staff received training in safeguarding vulnerable adults and were knowledgeable about the correct action to take if they had any concerns. One member of staff said, "I would report anything to senior management and complete a report."

Individual risk assessments identified potential risks to people and gave guidance to staff on how to support people safely. Assessments included risks such as nutrition and hydration, personal care and mobility. Risk assessments promoted independence by detailing what people could do for themselves and where support was required. One person told us about how they were tested on the mobility scooters before they were approved to take one out. This was to ensure they could use them safely.

The service followed appropriate recruitment process before new staff began their employment. Staff files showed photographic identification, a minimum of two references, full employment history and a Disclosure and Barring Service check (DBS). A DBS check helps employers to make safer recruitment decisions by providing information about a person's criminal record and whether they are barred from working with certain groups of people.

Staff were clear on their responsibilities for reporting and recording any accident or incidents. We reviewed incident and accident records and saw a description of what had occurred, any injuries and the immediate action taken. We saw external advice was sought where necessary for example, from the health services. Significant events that occurred were analysed in detail to ensure that actions had been taken to reduce reoccurrence.

Staffing levels were at the level assessed as safe by the service. There was currently one part-time support vacancy. This was being covered by existing staff. We were told that whilst there had been some changes within the staff team, it remained consistent and stable. We did receive some feedback from staff that as staffing levels remained consistent this meant that some weeks there was more people at the service with higher support needs. The registered manager told us that as the pre admission document was being amended this would give more detail about the level of staff support required during people's stay.

We reviewed records which showed that regular checking and testing of equipment had been conducted. This ensured equipment was maintained and safe for the intended purpose. Environmental risk assessments were in place to minimise potential risks. We saw that fire safety assessments were reviewed regularly. When fire drills took place, reflections were noted and followed up at the next evacuation to ensure they had been embedded in practice.

Medicines were stored and administered safely. Guidance was detailed for staff on how people preferred to take their medicines. Regular audits took place by a senior member of staff.



Our findings

The service provided effective care and support. One person said, "It is a delight to be here." One person said, "It is wonderful. The best hotel in town. Excellent food and I am well looked after. I enjoy staying here."

New employees received an induction which took them through different aspects of their role. The induction was aligned with the Care Certificate. All staff we spoke with confirmed they had received an induction. One staff member said, "We shadowed a more experienced member of staff." Staff were supported through regular supervisions. Supervision is where staff meet one to one with their line manager. We saw that staff's well-being, training and development were discussed. We saw that extra support was offered where necessary and any issues that had arisen were discussed and recorded.

Staff said they received regular training and this was supported by the records we reviewed. One staff member described training as, "Fantastic, it is a high priority here." Staff received mandatory training in areas such as fire safety, safeguarding vulnerable adults and manual handling. The service facilitated further recognised qualifications for people in health and social care. We highlighted to the registered manager that staff's knowledge in regards to the Mental Capacity Act (MCA) 2005 could be improved. The registered manager said this would be addressed through training that was scheduled.

The service had met the responsibilities with regard to the Deprivation of Liberty Safeguards (DoLS). DoLS is a framework to approve the deprivation of liberty for a person when they lack the mental capacity to consent to treatment or care and need protecting from harm.

Information about people's health conditions were described in their care records. This gave guidance to staff on the action that should be taken under certain circumstances to safely manage people's health conditions. We saw that the service liaised and worked closely with other health and social care professionals where appropriate.

Pre-assessment documents and care records described any support people required with eating and drinking. One person told us about the multiple food allergies they had. They told us how this information had been fully communicated to the chef and kitchen staff and they had all their needs met. There was a variety of choices on the menu and people could request alternatives. We saw that feedback gained from people had resulted in changes to sources of produce used.



Our findings

People were supported by staff that were kind and caring. One person said, "Staff go above and beyond. They go completely out of their way for you. They are very attentive. I am looked after very well." Another person said, "The staff team are brilliant."

We observed that staff were polite and professional. Staff spoke and interacted with people in kind and respectful ways. We observed staff engaging with people in conversation about areas of interest to them, such as sport, the local weather and places they had visited.

People's privacy was respected. Staff were mindful that people were on their holiday and offered support and assistance without being intruding. We observed people chose where they wished to spend their time, in their room or communal areas of the service. For example, one person enjoyed spending time alone in the quiet lounge where as other people enjoyed sitting together in the bar area.

Care records identified people's communication needs. We observed that staff communicated with people in their preferred way. One member of staff asked a person a question. The person had not heard. The staff member turned so they were facing the person and repeated the question slowly.

Staff described the service as having a positive, happy and relaxed atmosphere. One staff member said, "The quality of care is really good. People come back time and time again, which is a good sign."

The service had received many positive compliments. One compliment read, "The kindness and thoughtfulness you showed us was so much appreciated, enabling us to enjoy a most welcome break in lovely and comfortable surroundings." Another compliment said, "We thank-you again for your kindness and care. This is the third visit and each time it feels more like home."



Our findings

Care and support was responsive to people's needs. One person said, "Different people have different needs. It is very individual."

A pre-admission procedure took place to identify the level of care and support people required. Through this process the service established if they could meet the person's needs. A manager would speak to people near to the start of their break to check if any of their care needs had changed. The pre-admission document was in the process of being reviewed and changed. Staff had been involved in this process.

Care records contained a photograph of the person, medical history and essential contact details such as family members and GP. Care records described how people's personal preferences. For example, one care record said, "I like to remain in bed until 9am." People's communication needs were detailed. One care record said, "I talk slowly and carefully." Care records showed what people could do for themselves. Where support was needed, care records described the type of assistance people required. We did highlight to the registered manager that some care records had not been fully completed and that people's personal information in the , 'about me' section was limited. The registered manager said these would be addressed.

The service offered activities for people within the hotel such as musical entertainment and bingo. Weekly trips were offered to local places of interest such as museums and garden centre. One person said, "I enjoyed the trip. We had a very nice and pleasant day out." The service lead the veterans parade at the annual air show and were involved in local community armed services events. The hotel was also hosting their annual dinner dance in July 2017. The noticeboard in the entrance area displayed local church services.

The service had received one complaint in the last 12 months. The complaint was fully investigated a detailed reply given. Where the service could make improvements it had done so. For example, the menus had been changed as a result and were now in a larger font.



Our findings

A registered manager was in post at the time of our inspection. 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 home is run.

We received positive feedback about how the service was managed. One person said, "The manager is always there when needed." A staff member said, "The [registered] manager is wonderful, always has time for staff, approachable. You can bring up anything. Any concerns are taken seriously." The registered manager spoke about having an open door policy and being visible to the staff team and guests.

Information was communicated effectively to staff through a variety of systems. For example, through a verbal and written handover at the beginning of each shift, a diary and a communication book. Staff had an information sheet with key information about the current guests. This gave a summary of people's care needs so they could have this to hand. This was important as staff supported different people every week. Regular team meetings were held and staff spoke positively about these. The minutes were circulated for those unable to attend.

All guests were invited to complete a feedback survey after their break. The results from these surveys were very positive. Comments included, 'Can't improve on perfection,' and 'I have been overwhelmed once again by your continuing care and attention by all the staff.'

Systems were in place to regularly monitor the quality of the service. This included audits of health and safety, care records, medicines and accidents and incidents.

Staff said they felt valued and supported. Some staff had recently received an award recognising and appreciating their long service to the organisation.

The registered manager understood the legal obligations in relating to submitting notifications to the Commission and under what circumstances these were necessary. A notification is information about important events which affect people or the home. The registered manager had completed and returned the Provider Information Return (PIR) within the timeframe allocated and explained thoroughly what the home was doing well and the areas it planned to improve upon.