

Fenham Lodge Residential Care Homes Limited

Fenham Lodge

Inspection report

The Street
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Essex
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Tel: 01245 381550

Date of inspection visit: 4 June 2015

Date of publication: 19/08/2015

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 

Overall summary

Fenham Lodge provides accommodation and personal care for seven people who have a learning disability and require 24 hour support and care.

This was an unannounced inspection which meant the service and staff did not know we were visiting.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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 CQC is required by law to monitor the operation of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DOLS) and to report on what we find. We found the location was meeting the requirements of the DOLS.

Summary of findings

People who used the service told us that the service was a safe place to live. There were procedures in place which advised staff about how to safeguard the people who used the service from abuse. Staff understood the various types of abuse and knew who to and how to report any concerns.

There were procedures and processes in place to guide staff on how to ensure the safety of the people who used the service. These included checks on the environment and risk assessments which identified how risks to people were minimised.

There were appropriate arrangements in place to ensure people's medicines were obtained, stored and administered safely.

There were sufficient numbers of staff who were trained and supported to meet the needs of the people who used the service.

Staff had good relationships with people who used the service and were attentive to their needs. Staff respected people's privacy and dignity and interacted with people in a caring, respectful and professional manner.

People were involved in making decisions about their care and support. People's care plans had been tailored to the individual and contained information about how they communicated and their ability to make decisions. The service was up to date with recent changes to the law regarding DOLs and Mental Capacity Act (2005) and staff had received recent training on this subject.

People were supported to see, when needed, health and social care professionals to make sure they received appropriate care and treatment. People spoke highly about the quality of the food and the choices available.

A complaints procedure was in place. Everyone we asked said they would be comfortable to raise any concerns with the staff, manager or provider.

People, relatives and staff were complimentary about the management of the service. Staff understood their roles and responsibilities in providing safe and good quality care to the people who used the service. The service identified shortfalls in the service provision and took actions to address them.

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 systems in place to manage safeguarding matters. Staff understood how to recognise abuse or potential abuse and how to respond and report these concerns appropriately.

There were enough staff to meet people's needs.

Where people needed support to take their medicines they were provided with this support in a safe manner.

Good



Is the service effective?

The service was effective.

Care workers were trained and supported to meet the needs of the people who used the service.

People were supported to maintain good health and had access to appropriate services which ensured they received ongoing healthcare support.

People made choices about what they wanted to eat and drink and the quality of the food provided was good.

Good



Is the service caring?

The service was caring.

People had good relationships with care workers and people were treated with respect and kindness.

People's privacy, independence and dignity was promoted and respected.

People and their relatives were involved in making decisions about their care and these were respected.

The atmosphere in the home was warm and welcoming.

Good



Is the service responsive?

The service was responsive.

People's wellbeing and social inclusion was assessed, planned and delivered to meet their needs.

People's concerns and complaints were investigated, responded to and used to improve the quality of the service.

Good



Is the service well-led?

The service was well-led

The service provided an open culture. People were asked for their views about the service and their comments were listened to and acted upon.

Good



Summary of findings

The service had a quality assurance system and identified shortfalls were addressed promptly. As a result the quality of the service was continually improving. This helped to ensure that people received a good quality service.

Fenham 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 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 the 4 June 2015 and was unannounced and was undertaken by two Inspectors.

Before our inspection, the provider 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.

To help us plan what areas we were going to focus on during our inspection, we looked at the PIR and reviewed information we had received about the service such as notifications. This is information about important events which the service is required to send us by law. Information sent to us from other stakeholders for example the local authority and members of the public were also reviewed.

We spoke with six people who were able to express their views about the service and four relatives over the telephone. We also spoke with the provider, registered manager and two members of the care team.

We looked at records in relation to all of the people's care, management of the service, staff recruitment and training records, and systems for monitoring the quality of the service.

Is the service safe?

Our findings

People told us they felt safe living in Fenham Lodge. They also told us that they knew how and to whom to direct any concern or issue. A relative told us that they felt that their relative was well cared for and they also said, “My relative is absolutely safe, no problems at all”.

All newly appointed staff received awareness training around safeguarding of adults within the first week of commencing employment to ensure that they were aware of what abuse was, how to identify it what to do if they saw or suspected abuse was occurring. They then completed regular updates in order to keep them aware and alert. Staff demonstrated they had a good awareness of what constituted abuse or poor practice and were able to describe the types of abuse that might take place. They knew what to do if they saw or suspected abuse and the processes for making safeguarding referrals to the local authority. They understood their responsibilities around keeping people safe. There policies and procedures in place to guide staff on safeguarding and their responsibilities around keeping people safe.

Risks to people's safety were appropriately assessed, managed and reviewed. Care records showed that risk assessments had been completed on areas such as the environment, finances and accessing the community safely. Risk assessments enabled people to go about their day to day activities safely and enabled them to maximise their independence both within the home and community.

We noted that all of the fire doors in the service were wedged open. A report from the fire service on the 11 March 2014 stated “The inspection revealed that fire doors within

the premises were wedged open, The responsible person should ensure that fire doors are able to close quickly in the event of a fire”. No action had been taken to address this issue and was a concern as in the event of a fire a door wedge would not allow the fire doors to close, causing a risk the fire could spread more quickly. The provider gave a commitment to having this matter addressed and sent us written confirmation that a magnetic self-closure mechanism designed to enable fire doors to close quickly and safely in the event of a fire was being sourced.

There were two members of staff on duty throughout the day and one staff member sleeping in at night. Staff told us that additional staff were available to support people's community participation so that people could go out when they wanted. There was also 24 hour on-call support available in the event of an emergency. From looking at staffing rotas and talking to staff we found that appropriate staffing levels were being maintained which linked to meet people's needs and care for them safely. Staff had worked at the service for many years and people benefitted from a team of people that knew them well and understood their needs.

We observed people receiving their breakfast medicines in a safe, supportive and understanding way. Medicine records and storage arrangements seen were in good order and demonstrated that people received their medicines as prescribed. There was a medicines policy and procedure that supported staff's practice. Administration records were detailed and accurate and there were profiles in place that showed if people had any known allergies. There were also clear instructions about how people's medicines should be administered.

Is the service effective?

Our findings

People received effective care and support which took account of their wishes and personal preferences. People told us that they were happy with the service that they received, that their needs were met and the staff were competent in their roles.

During our inspection we observed people being offered choices by staff about their care, for example what food they would like and how they were planning to spend their day. The Care Quality Commission (CQC) monitors the operation of Deprivation of Liberty Safeguards (DoLS) which applies to care homes. Staff had a good understanding of DoLS legislation and had received training. There had been no DoLS referrals made at the time of our inspection, we discussed this with the provider on the day, who assured us they would communicate with the Local Authority to ensure no applications were required for people living at the service.

Staff told us that access to training was good and gave them the information that they needed to be able to deliver care and support to people who used the service. They were positive about the training they received and how it helped them to support people. Two members of staff told us, "We have access to lots of training and support."

Training records showed that staff had received updated training to maintain their knowledge and competency. This ensured people received care and support from an effective team. Although most people using the service did not require support with their mobility staff had not received any practical up to date training about moving and handling. This is important because if people's needs changed or they had a period of illness affecting their mobility staff would need to be up to date in this area. The provider and the manager gave a commitment to addressing this matter.

Staff felt supported in their role and were provided with one to one supervision meetings. This was confirmed in records which showed that care workers were provided with the opportunity to discuss the way that they were working and to receive feedback on their work practice. This told us that the systems in place provided staff with the support and guidance that they needed to meet people's needs effectively.

There had not been any new staff appointed at the service for some considerable time, however the manager explained that new staff received a comprehensive induction to the service which included shadowing other staff, reading people's care plans and related documents, such as policies and procedures.

People received good support to meet their healthcare needs. People had access to healthcare professionals according to their specific needs. The service had regular contact with healthcare professionals to ensure people were provided with the care and treatment they needed. Where the staff had noted concerns about people's health, such as weight loss, or general deterioration in their health, prompt referrals and requests for advice and guidance were sought.

People were provided with choices of food and drink and a balanced diet. Relatives said that the meals were plentiful and they were confident that their relatives had enough to eat and drink. One relative told us, "The meals are enormous." The menu for the day was displayed in the service and people confirmed that they were supported to menu plan and make their choices from the menu. People played an active part in preparing their own meals with support where necessary and ate their meal in an unrushed manner and at a pace that suited them. We observed people preparing their lunch and they really enjoyed doing this for themselves with appropriate but non-invasive staff support to ensure they stayed safe.

Is the service caring?

Our findings

People told us that staff were caring towards them and always treated them with dignity and respect. There was a warm and friendly atmosphere in the home. People who lived in the home and staff had a good rapport and it was clear to us that staff knew people very well. We observed that staff interactions with people were positive and the atmosphere within the service was seen to be welcoming and calm. Staff demonstrated affection, warmth and compassion for the people they supported. We saw that interactions between staff and people who used the service were friendly and easy-going. One relative told us “Fenham lodge is wonderful” “My relative is so well looked after”.

Staff spoken with demonstrated an in-depth, detailed knowledge and understanding of people’s needs. They were able to tell us about people’s preferences, risks and how they were managed, ways of communicating and specific health issues. People told us that staff supported them to do whatever they decided they wanted to do. Because they knew each other so well the relationships were positive and enabling.

People’s independence was promoted and supported. Care plans were person centred and showed how choice and independence was facilitated by staff. People had activity plans which clearly detailed when they had time set aside to undertake domestic duties and tasks to support their independence. On the day of our inspection we observed people cleaning and dusting their bedrooms and they told us how much they enjoyed this and took pride in doing so.

People’s care plans contained comprehensive information about their needs and preferences. The information was clear and there was sufficient detail to ensure staff were able to provide care consistently. The staff team had remained unchanged for a number of years and from discussions with staff that they knew and understood people’s care needs very well.

Throughout our inspection we saw that staff were courteous, caring and patient when supporting people. People were given time to make decisions. People’s privacy and dignity was protected, for example, staff were seen to knock and wait for an answer before entering people’s bedrooms. Staff told us how they respected people’s dignity and privacy, including when supporting people with their personal care needs, and understood why this was important. Relatives that we spoke with told us that the staff were very caring, they also told us that the manager and provider always kept them informed if there was any changes in their relative’s health and wellbeing. One relative told us, “I am kept informed about everything, any changes at all and they are straight on the blower.” They also said, “I am so lucky my relative is at Fenham Lodge.”

Relatives told us that there were no restrictions on their visiting their relatives. One relative told us, “I am free to come and go as I please, and always made welcome.”

From our observations we saw that people had a good sense of well-being, they were at ease and relaxed in their home and came and went as they chose and were supported when needed.

Is the service responsive?

Our findings

People were supported to pursue and follow their specific interests. People talked at length about their personal interests. For example one person loved horses and they spent a lot of time telling us about their job at a local sanctuary. The persons relative told us that the provider had been instrumental in finding this post and supporting it.

We reviewed the care plans for three people. They reflected the mood of the person in a positive manner. Records showed the care given was as identified in people's care plans and risk assessments and that their preferences and wishes were promoted and respected.

We saw that people's activities for the week were posted on the notice boards around the service as a reminder to them. People told us that they felt that they had access to a good range of daytime activities such as art classes, music classes, swimming, horse riding, drama, bowling and walks and trips out. People told us about their days, they were animated and very happy to tell us about what they did and how much they enjoyed it. The service ensured that people enjoyed full and active lives doing things they enjoyed.

People told us they were able to express their views about the quality of the service provided and to share ideas and suggestions with staff, in satisfaction surveys and in meetings. The minutes of these meetings showed people's feedback was taken into account and acted on. People told us that they were often asked if they remained happy with the service provided. People were also regularly supported to complete satisfaction surveys that were in the appropriate format for their needs. People were happy with the care they received.

There was an effective complaints procedure in place and the service listened to people's concerns. People told us that if they had any concern they would discuss these with their key worker or other staff on duty. People told us that they felt able to talk freely to staff about any concerns or complaints and were confident that if they had a concern they would be listened too, and their concern addressed. Relatives told us that they were aware of how to make a complaint and were confident that if they needed to do so it would be listened to and addressed as a matter of urgency. Staff told us that they were aware of the complaints procedure and knew how to respond to people's complaints. There had been no recent complaints.

Is the service well-led?

Our findings

The provider had several quality assurance processes to continually improve the service for people. As part of the quality monitoring process the provider carried out checks to assess standards in the service. This examined areas such as the environment, food and support plans. This was used to put an action plan in place to make further improvements. We saw that audits had been completed on things such as: medicines, fire and health and safety. However, during our inspection it was noted that fire doors throughout the service were wedged open. When we discussed this with the provider and manager we were told that the local fire department had seen this at their last inspection and had said that it was acceptable for these doors to be wedged open. This was not confirmed as being the case in the subsequent report that was sent by the fire department, which clearly said that this matter needed to be addressed. We saw that when action had been identified this was not always followed up to ensure that action had been taken. However the provider has now given a commitment to addressing this matter as a matter of urgency.

Staff recruitment records were not held at the service, but kept safely off site by the provider. This matter was discussed with the provider and they gave a commitment that the necessary records would be stored at the service for future and subsequent inspections. There had been no new staff appointed at the service for nine years. We discussed the recruitment process with the registered manager and they assured us that all necessary checks would be completed before appointing a new staff member. These checks would include a Disclosure and Barring Service (DBS) criminal records check, previous employment references and a health check. This would help to ensure that only appropriate care workers were employed to work with people at the service.

The service provided an open and empowering culture. People told us that they felt that the service was well-led and that they knew who to contact if they needed to. They told us that their views about the service were sought and acted on.

Staff told us that both the registered manager and the provider were very supportive and both often worked

alongside them and therefore had a visible presence in the home. They also told us that both the manager and the provider were approachable and would listen to any concerns or issues expressed.

We saw the registered manager worked well with staff and was available to support them when needed. Staff told us that the manager was very supportive and they were clear about their responsibilities. One member of staff said, "The manager is open and approachable and we are confident that any issues would be listened to and addressed."

Staff were clear about the process to follow if they had any concerns and knew about the whistleblowing policy and would have no hesitation to use it if the need arose. We were told by staff and relatives that the registered manager had an open door policy and they were able to speak with them at any time.

There was good leadership demonstrated in the service. The registered manager understood their role and responsibilities as a registered manager and in providing a good quality service to people. They told us that they felt supported in their role and understood the provider's values and aims. They told us that they were supported by the provider in regular contact and supervision.

People were involved in how the service was managed and able to give feedback to improve the service they received. Surveys were last received in September 2014, comments included, 'It's such a lovely and homely place', 'We have always had a good relationship with staff', 'They support all the things our relative does, they are friendly and professional' and 'We wanted to put in writing our most sincere thanks and gratitude to you and all your staff at Fenham lodge for the outstanding care and support you have given our relative and to us'.

The management team involved people and their relatives in the assessment and monitoring of the quality of care. We saw that there were regular meetings where people who lived in the home were able to discuss how the home was being run and suggest changes. During telephone conversations with relatives they told us that the service was very good and extremely well run. One relative said, "The provider is blooming marvellous." Another said, "I can't praise them enough." All of the relatives that we spoke with rated the home as nine out of 10 and 10 out of 10 respectively.