

Ms Catherine Blyth

Feng Shui House (Blackburn)

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

About the service

Feng Shui House Blackburn is a residential care home providing personal care to 12 people aged 65 and over at the time of the inspection. The service can support up to 16 older people. Accommodation is provided in a detached house with bedrooms on two floors.

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

People felt safe in Feng Shui House Blackburn and had no concerns about the care they received. There were enough staff to meet people's needs and staff had time to engage then in conversation. Medicines were managed safely and the home was clean. The provider had systems to assess and manage risks. People had personal pendant alarms to alert staff if they needed support.

People were supported by staff who were skilled and knowledgeable about their needs. Staff told us they felt well supported by the registered manager and received the training they needed. People told us they liked the food and the registered manager had systems to assess and monitor people's nutritional needs. 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.

People told us staff were kind, caring and respectful towards them. Relatives also confirmed they found staff to be very caring and treated people as if they were part of their family. Staff encouraged people to be as independent as possible and involved them in decisions about their care.

People told us staff knew how they liked to be supported and offered them choices. Care plans contained information on people's health and communication needs as well as their family background, spiritual needs and social interests. The registered manager reviewed all care plans at least monthly to ensure they accurately reflected people's needs. Activities were available for people to participate in if they wished.

The provider had systems to assess and monitor the quality of the service. The registered manager carried out regular audits to ensure appropriate levels of safety and quality were maintained at the home. Staff told us the home was well-led and that the registered manager treated everyone equally and fairly.

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

Rating at last inspection

The last rating for this service was requires improvement (published 13 February 2019).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information, 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.

Is the service effective?

Good ●

The service was effective.

Is the service caring?

Good ●

The service was caring.

Is the service responsive?

Good ●

The service was responsive.

Is the service well-led?

Good ●

The service was well-led.

Feng Shui House (Blackburn)

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector and one assistant inspector.

Service and service type

Feng Shui House Blackburn is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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. This means that 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used the information the provider sent us in the provider information return. This is information

providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, two members of care staff and the cook.

We reviewed a range of records. This included three people's care and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection

As requested, following the inspection the registered manager sent us confirmation they had ensured two staff files were updated to contain a full employment record.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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 avoidable harm. Staff had completed safeguarding training and knew how to report possible signs of abuse.
- People told us they felt the home was safe. Comments made to us included, "I feel safe. The care here is very good" and "I think [name of relative] is very safe here. She is wobbly on her feet, but they really look after her."

Assessing risk, safety monitoring and management

- Systems were in place to assess and manage identified risks. Care records included information for staff to follow to support people safely. People were provided with individual pendant alarms to alert staff should they require assistance.
- The registered manager completed regular checks to ensure the safety of the premises and any equipment used. They also documented the support people would need to evacuate the premises safely in the event of an emergency.

Staffing and recruitment

- Staff were generally safely recruited. The registered manager carried out checks to ensure prospective employees were suitable to work with vulnerable people. However, two staff files did not contain a full employment history. The registered manager took immediate action to ensure these records were fully completed.
- There were enough staff on duty to meet people's needs in a timely way. A staff member told us, "There's always plenty of staff on shift. You have time to sit and chat with the residents."

Using medicines safely

- Medicines were managed safely. Relevant staff were suitably trained to administer medicines and checks on their practice had been carried out.
- Records were fully completed to show that people had received their medicines as prescribed.
- Staff regularly asked people if they required medicines which were prescribed 'as needed'.

Preventing and controlling infection

- The provider and registered manager had systems to help prevent and control infections. Staff had received training in hand hygiene and how to prevent the spread of infection in the home.
- We observed staff regularly reminding people to wash their hands.

Learning lessons when things go wrong

- The registered manager had improved systems to learn lessons when accidents or incidents occurred. They completed regular audits of accidents and falls people had experienced to check if there were any trends or if changes needed to be made to the environment or equipment used.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The provider had systems in place to ensure people received care which met their individual needs. The registered manager carried out assessments of people's needs before they moved to the home to ensure they could be looked after properly. Care plans were developed to meet individual's needs and preferences.
- Staff had access to best practice guidance to help them deliver effective care.

Staff support: induction, training, skills and experience

- Staff received the support and training they needed to carry out their roles effectively. A person told us, "I think they [staff] are properly trained."
- Staff told us they felt supported by the registered manager through day to day contact, regular supervision and an annual appraisal of their performance. Supervision sessions provided an opportunity for staff to discuss their work performance and professional development.

Supporting people to eat and drink enough to maintain a balanced diet

- The registered manager made sure people's nutritional needs and dietary preferences were met. Staff provided individual support to people when needed to ensure they were able to eat their meals.
- Staff monitored people if they were at risk of poor nutrition. Advice from appropriate healthcare professionals was sought, as needed.
- People clearly enjoyed the meals provided for them. They were able to ask for alternatives if they decided they did not want what they had originally chosen.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with health professionals to ensure people's needs were assessed and effectively met. Written feedback from one health professional stated, "As a visiting professional working with Feng Shui Care Home Blackburn, staff take on advice and follow plans that we put in place."
- The registered manager had put in place a 'hospital passport'; this included key information for health professionals to help ensure people received the care they needed.
- Staff had received training in oral health care. The registered manager was in the process of finding a dentist who was willing to undertake visits to the home to assess people's oral health needs.

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

- The environment was suitable for people's needs. Dementia friendly signs were in place to help people find their way around the building.

- People were able to personalise their individual bedrooms as they wished.

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 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 can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. 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 had the appropriate legal authority and were being met.

- The registered manager had submitted required authorisations to the relevant local authority if people were unable to consent to their care arrangements in the home.
- Care records contained information about people's capacity to make day to day decisions. Staff supported people in the least restrictive way possible. The service had policies and procedures to underpin this approach. One person told us, "I can come and go as I want."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- The staff and the registered manager knew people well and staff were able to provide examples of people's preferences. During the inspection we witnessed kind and caring interactions between staff and people. Relatives told us, "They [staff] are just so kind. They treat her like part of the family", "I'm happy [name of relative] is treated with kindness" and "I think they [staff] go above and beyond what we might have expected."
- Staff completed training in equality and diversity. The provider's policies emphasised the need to treat people as individuals with diverse needs.

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

- Staff involved people in decisions about their care and their daily lives. While people could not recall having seen their care records, we saw evidence that they and their families had been involved in care planning. One relative confirmed, "I have seen the care plan. We were involved in it when [name of relative] first came in."
- The registered manager was aware of how to contact and gain support from an advocacy service when required. People can use advocacy services when they do not have friends or relatives to support them or want help from someone other than staff, friends or family members to understand their rights and express their views.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. Appropriate arrangements were in place to protect the dignity and privacy of people who were in shared bedrooms. One person told us, "They [staff] are respectful, they treat you so well here. It's like a home from home."
- People told us they were supported to retain their independence. Care records reminded staff of the importance of encouraging people to do as much as possible for themselves.
- Care records were securely stored on an electronic system that was accessible only to authorised staff.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The provider had systems to ensure people received care which met their individual and diverse needs. The registered manager regularly reviewed each person's needs to ensure staff had up to date information about the support they required. A staff member told us, "It's about providing care around that person's needs and doing things how they like to do it."
- People's care records contained information about how they wanted their care to be delivered. The registered manager told us they had a plan to further improve the personalisation of care records.
- People were happy with the care provided. Comments people made included, "Staff are on the ball they never stop. [Name of relative] is always clean, she is always dressed nice" and "Staff treat [name of relative] as an individual. They seem to know what she likes."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider ensured people's communication needs were assessed and met. Care records included information for staff about how best to communicate with people.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The provider had a weekly programme of activities on display which were aimed at helping people maintain their emotional and physical health. However, people we spoke with were not always certain about what was available for them to participate in. We observed staff supporting people to take part in board games. A relative told us activities were provided although their family member did not usually wish to join in.
- Staff supported people to maintain relationships with those close to them. Relatives told us there were no restrictions on when they were able to visit.

Improving care quality in response to complaints or concerns

- The provider had a system for responding to and managing complaints. This informed people how they could make a complaint and that any concerns would be taken seriously. There had not been any complaints received since the last inspection.

End of life care and support

- The provider had policies in place to support staff to deliver high quality end of life care. No one was at this stage of their life when we inspected the service. However, people had been supported to document any preferences they had about how they should receive care at the end of their life.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

- The registered manager and staff were committed to delivering a person-centred service which achieved positive outcomes for people.
- Staff were knowledgeable about people's needs and preferences. A staff member told us, "You get to learn them. It is also on the care plan what they like, and you get to know them."

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

- There had been no serious incidents at the home since the last inspection. However, the provider had a policy to inform staff what to do if something went wrong with a person's care.
- Good relationships had been developed between the registered manager, staff, people who lived in the home and their family members. The registered manager encouraged feedback from people to help improve the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager demonstrated strong leadership and a commitment to ensuring legal requirements were met. The service was well organised with clear lines of accountability.
- Staff understood their roles and responsibilities and how to seek advice and guidance about people's care. For example, staff explained how they recorded any changes in people's needs, shared information with other staff and contacted external professionals when necessary.
- The registered manager used a variety of method to assess, monitor and improve the quality of the service provided; these had been improved since the last inspection and were used to make any necessary changes in the home.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider had systems that engaged and involved people, relatives and staff.
- The registered manager used face to face meetings, surveys and daily interaction to gain feedback about the service. Minutes of meetings showed action had been taken to address any issues raised. Completed surveys showed people had rated the service as either good or outstanding in all areas.
- Staff spoke positively about the registered manager and the way the service was run. Comments made

included, "I love it here. I like everything; the way it's run, we have fun with the residents. It's like one big happy family" and "[Name of registered manager] is firm but fair."

- The registered manager and staff worked in collaboration with external agencies to help ensure people received high quality care. A professional had made positive comments about the way the home was run.