

Methodist Homes Fairthorn

Inspection report

117 Townhead Road
Dore
Sheffield
South Yorkshire
S17 3AJ

Date of inspection visit: 05 December 2023

Good

Date of publication: 04 January 2024

Tel: 01142368646 Website: www.mha.org.uk/retirement-living/retirementapartments-24-hour-care/fairthorn/

Ratings

Overall rating for this service

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

Summary of findings

Overall summary

About the service

Fairthorn is a specialist 'extra care' housing scheme. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. At the time of the inspection the service was providing personal care to 8 people living at the scheme.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

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. Staff focused on people's strengths and supported people to achieve their goals.

People were supported safely with medicines. Infection prevention and control practices reflected current guidance. Risk assessments were in place and provided staff guidance on how to manage these risks. It was very evident staff had ensured they fully understood the needs of people.

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People's care, treatment and support plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life. The service had established good links in the local community and had worked in partnership with key organisations.

Right culture

People were empowered because of the ethos, values, attitudes and behaviours of the management team and staff. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs, and rights at the heart of everything they did.

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

Rating at last inspection and update

The last rating for this service was good (published 27 December 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 safe findings below.	
Is the service well-led?	Good 🔍
Is the service well-led? The service was well-led.	Good •
	Good •



Fairthorn

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 Health and Social Care Act 2008.

Inspection team

The inspection was completed by 1 inspector and a regulatory co-ordinator.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 5 December 2023 and ended on 12 December 2023. We visited the service on 5 December 2023.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people and 3 relatives by telephone about their experience of the support provided. We spoke with the registered manager, the deputy manager and a visiting professional at the service.

We reviewed a range of records. This included 3 people's care and medicine records. We looked at 3 staff files in relation to recruitment and training. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse and avoidable harm.
- People said they felt safe and trusted the staff who came to support them.
- Staff were able to recognise possible signs of abuse and knew how to report such concerns promptly.
- One relative said, "[Relative] clearly feels safe and secure at Fairthorn. The fact there are so many familiar faces who have worked there for a number of years is wonderful."

Assessing risk, safety monitoring and management

- The provider assessed risk to ensure people were safe and well. Staff took action to mitigate any identified risks.
- Risk assessments were personalised and provided staff with guidance to follow. We found risks were assessed for medicines, mobility, falls, premises, and nutrition among other areas which considered all aspects of a person's situation.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- There were systems to learn from accidents and incidents which had occurred. Details of action taken to resolve the incident or to prevent future occurrences were recorded where appropriate.
- Staff understood the importance of reporting and recording accidents and incidents.

Staffing and recruitment

- •The provider ensured there were sufficient numbers of suitable staff.
- People were supported by carers they had got to know over a period of time and were comfortable with.
- People told us they saw consistent staff. Comments from relatives included, "After covid, it took a while to bring staffing up to full strength, but they now have a fantastic team of efficient and empathetic carers who are always willing to go the extra mile for residents." Another relative said, "Congratulations to the management team for having such a low turnover of staff, it means the absolute world to us."
- The provider operated safe recruitment checks.

Using medicines safely

- People were supported to receive their medicines safely by staff who had been trained.
- Medicines risk assessments were detailed and provided staff with key information about side effects and descriptions of all medicines.

Preventing and controlling infection

- Staff managed the control and prevention of infection well.
- Staff had completed infection control and food hygiene training and followed safe infection control practices.
- People were supported to keep their private spaces and homes clean and took pride in this.

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness

- There was a positive and open culture at the service.
- The culture of enablement, supporting people to live more independent and fulfilling lives was at the centre of everything the service did.
- People and their relatives provided consistent positive feedback about the service and the leadership of both the registered manager and the staff team at the service. One relative commented, "Yes, the service is excellently managed. Nothing needs to be changed, they have adapted, as they have grown, and it [the service] is excellent."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The management team demonstrated a passion for providing a high-quality service, which was continually being developed to meet each person's needs in a holistic manner.
- The provider had a clear management structure that monitored the quality of care to drive service improvements in service delivery.
- Quality assurance systems were robust. Audits completed by managers and the provider identified shortfalls with showed action taken to address shortfalls.

How the provider understands and acts on the duty of candour, which is their legal duty to be open and honest with people when something goes wrong

• The provider was open and transparent when dealing with any issues or concerns. They understood their responsibility to apologise and give people and explanation if things went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and staff were involved in the running of the service and fully understood and considered people's protected characteristics.
- The service empowered people to make decisions about their care in a meaningful way.

Continuous learning and improving care

- Systems for monitoring and assessing the quality and safety of the service were fully embedded. There was a strong focus on continuous improvement and systems,
- The provider had created a learning culture at the service which improved the care people received.

Working in partnership with others

- The provider worked in partnership with others.
- The service had established good links in the local community and had worked in partnership with key organisations and other agencies that provided social care services to improve people's opportunities and experiences.