

Fairhope Ltd

Fairhope

Inspection report

22a West Borough
Wimborne
BH21 1NF

Tel: 01202709091

Date of inspection visit:
10 March 2023

Date of publication:
22 March 2023

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Fairhope is a domiciliary care agency providing person care and support to people in their own houses and flats. The service provides support to older people. At the time of our inspection there were 22 people receiving personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People and their loved ones told us they received a safe service from Fairhope. Staff were dedicated to their role and felt supported. Staff were recruited safely and most had worked at the service for many years.

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. Risks to people's wellbeing and safety were identified, assessed and staff worked in ways to reduce the risks people faced. Lessons were learnt within the service and analysis of accidents and incidents supported ongoing safe practices.

Infection prevention and control procedures were robust, and staff had access to enough personal protective equipment (PPE). Medicines were managed safely, staff were trained and had their competency assessed. Staff received a thorough induction and communication between the team of staff was effective.

Systems were in place to monitor the quality and safety of the service. However, it was not always clear how the service continuously improved. The registered manager immediately sought to develop the systems to ensure they evidenced the improvements they made within the service.

People, their relatives and staff told us Fairhope was well led. Positive feedback was received about the leadership of the service. Staff were proud to work at Fairhope and the service they provided. The service sought to make links and connect people to their community. The service had established a good reputation by working well with external health and social care professionals.

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 good (published 11 April 2018).

Why we inspected

We had not inspected and visited this service since 2018. As a result, we undertook a focused inspection to

review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

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 ●

The service was well-led.

Details are in our well-led findings below.

Fairhope

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 carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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 that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 10 March 2023 and ended on 12 March 2023. We visited the location's office on 10 March 2023.

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 service improvement and safeguarding teams. The provider completed a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us 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 2 people who used the service and 5 relatives about their experience of the care provided. We spoke with and received feedback from 7 members of staff including the registered manager, provider and care workers. We received feedback from 2 health and social care professionals on their experience of working with the service.

We reviewed a range of records. This included 3 people's care records and medication records. We looked at 2 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 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. At this inspection 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 and their relatives told us they felt safe with the service provided by Fairhope. Some of their comments were: "My loved one [name] is absolutely safe", "It gives me peace of mind the care staff being here", "They are safe because they are generally caring and very pleasant", "Fairhope are a safety blanket, they are pretty much invaluable", "The service is safe, I know I can call the registered manager [name] and they will sort it out", "I feel they are safe as they involve me and contact me if they need to." A health and social care professional said, "I would consider people are safe, staff are well trained and managed, and I have observed good person-centred work."
- Staff told us they knew how to recognise the signs that someone may be at risk of harm or abuse. They knew who to report their concerns to both within the service and externally.
- There were clear communication channels for raising concerns within the service. A member of staff told us, "I would report to my manager straight away and ask advice on how to approach the matter depending on the situation. The registered manager would then report to social services."
- Staff had received training in safeguarding and were confident any concerns they raised would be taken seriously and acted upon by the registered manager and deputy manager. A member of staff told us, "Any concerns we had the registered manager [name] would sort." Another member of staff said, "I am confident that the office deals with any raised concerns in a quickly and effective manner."
- The registered manager told us they felt confident in reporting concerns and understood when this was necessary.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People had risk assessments in place for all their care and support needs. Risk assessments were updated in response to a change in a person's condition and during annual review. Records showed changes had been made following discharge from hospital or an accident.
- Risk assessments were detailed; staff understood the risks and knew people well. Staff were clear in their instructions to promote safe ways of working.
- People had an environmental risk assessment completed which covered potential hazards within the home, such as bed rails and equipment safety.
- There were opportunities within the service to learn from accidents and incidents. Accidents were recorded and analysed, the outcomes were used to reduce the likelihood of the accident or incident happening again.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service. Most of the staff at Fairhope had

worked at the service for many years, they told us they were happy.

- People received a rota of who would be visiting each day, they told us this was important to them. There was enough time to travel to people and staff did not feel rushed.
- Induction procedures were in place and all staff had training and a number of shadow shifts before working alone.
- Recruitment processes were in place and staff were supported with spot checks and supervisions. Staff told us they received ongoing support from the registered manager and office team.
- Staff files contained appropriate checks, such as references and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed. There were safe procedures in place including a dedicated member of staff who took responsibility for ensuring procedures were followed correctly.
- Medicine administration records (MAR) were completed correctly and their completion checked every month. Changes to MAR were made following instruction from the GP or pharmacist. This meant people were receiving the correct treatment. The registered manager was making changes to the MAR to further improve safety.
- Staff responsible for giving medicines had been trained and had their competency assessed.
- Where people were prescribed medicines they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.

Preventing and controlling infection

- Safe working procedures in place meant people were protected from avoidable infections.
- Staff had received training in hand hygiene procedures, and this was monitored throughout the service.
- There was enough supplies of PPE and people confirmed staff wore this when working to keep them safe. PPE compliance was confirmed during staff spot checks.
- Adjustments had been made in response to the COVID-19 pandemic and policies changed in response to government guidance where necessary.

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. At this inspection 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.

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

- Quality assurance processes were in place and enabled the registered manager to monitor the standard of the care provided. The registered manager was developing their system to ensure continuous improvement from events was evidenced.
- Policies and procedures were in place to ensure the service operated safely.
- A range of audits were carried out and included medicines, care records and incidents. Actions identified were completed where necessary.
- Staff meetings were held, and this included regular updates between the small staff team. Staff told us communication channels were good within the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff told us they were proud to work for Fairhope. Support from the registered manager and the provider was appreciated. Staff told us they worked with some kind and compassionate colleagues. Some comments we received were: "We have a good team", "It makes me proud to work for Fairhope when people and their family let us know how happy they are", "I've been a carer for a long time and I feel that working for Fairhope has made me the best carer I can be", "When I leave each visit and the service user has a smile on their face that makes me proud", "Knowing that we have built up an amazing team together makes me proud, hearing gratitude from our service users makes me proud to be a part of Fairhope."
- Staff told us they felt appreciated by Fairhope. Staff received praise and thanks for their work. A member of staff said, "Yes, I have always felt appreciated at Fairhope."
- Positive feedback was received about the leadership of the service. The registered manager and provider were passionate about their staff team and, providing a good working environment was one of their priorities. Comments we received included: "I have always found the registered manager [name] to be very approachable and kind. I feel at ease with them and can confide in them, they deal with any issues quickly", "I've experienced nothing but help and support within my time at Fairhope from management. I feel that I am able to contact both the registered manager [name] and the provider [name] at any given time, no matter what time of the day", "It is well managed, the registered manager [name] is very pleasant", "It's absolutely fantastic and I would recommend to anyone."

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

- The registered manager understood the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm.
- Concerns and complaints were dealt with immediately. Records showed concerns were dealt with promptly and demonstrated an open culture within the service.
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement. The service had not had to make any notifications since the last inspection.

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

- Fairhope undertook surveys and questionnaires to monitor the standard of the service they provide. Results from the 2022 survey were positive. However, the registered manager had received feedback the survey was too long, in response to this they had changed it to make it more focused.
- Results and actions taken from the surveys were not always communicated to people using the service. We spoke with the registered manager and they immediately planned improvements to the process and to produce a report to share from the 2023 survey.
- People and their relatives were encouraged to feedback about the service in between the formal annual surveys. We received some positive feedback about the service. Some of the comments included: "Your carers are in possession of admirable qualities, sympathetic, friendly and administer care from the heart", "We would like to thank all your staff who we have never met but help run things smoothly."
- The registered manager told us they have a good working partnership with various health and social care professionals. A health and social care professional said, "I consider I have a good and open working relationship with the registered manager and the carers I meet. I find that the carers genuinely care about the people they work with, will often put themselves out and do extra tasks for clients."