

# **Care South**

# Fairlawn

### **Inspection report**

St Marys Road Ferndown Dorset BH22 9HB

Tel: 01202877277

Website: www.care-south.co.uk

Date of inspection visit: 04 January 2021

Date of publication: 18 January 2021

### 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

Fairlawn is a residential care home providing personal and support to older people, some of who are living with dementia. The service can support up to 60 people. There were 55 people living at the home at the time of inspection.

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

Improvements had been made to planned staffing levels. The improvements had been sustained following our last inspection. There was a focus on recruitment and retention of staff at Fairlawn. People, their relatives and staff told us this had improved. There was a new manager who complimented the team already in place. There was confidence in the manager and the deputy manager.

Infection control procedures were in place to contribute to keeping people safe, these had been enhanced due to the Coronavirus pandemic. People, their relatives and staff were updated, and the provider ensured that they had additional oversight and offered increased support to the home.

People felt safe and their relatives were reassured. Staff had received training and knew how to recognise concerns and who to report them to, they felt confident the manager would act on any information of concern. There were systems in place to ensure lessons were learned and these were used to improve practice within the home.

Quality assurance systems were robust and were used to drive improvements. Staff felt proud to work at Fairlawn, felt appreciated and had confidence in and respect for their colleagues. People and staff felt involved in the home and were kept updated. The manager and deputy manager understood their responsibilities in their respective roles and worked with a variety of health and social care professionals to meet the needs of people living at Fairlawn.

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 requires improvement (published 10 September 2019) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an unannounced comprehensive inspection of this service on 29 July 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve Staffing.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Wellled which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Fairlawn on our website at www.cqc.org.uk.

#### 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.	
Deatils are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well led.	Good •



# Fairlawn

### **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

Fairlawn 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.

Fairlawn did not have a manager registered with the Care Quality Commission. The registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The new manager had made an application to the CQC to become the registered manager for Fairlawn

#### 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 professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to

send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with two people who used the service and five relatives about their experience of the care provided. We spoke with nine members of staff including the manager, deputy manager, senior care workers, care workers, activity staff and housekeeping staff. We made general observations throughout the day within the home. Following the site visit we spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and medication records. We looked at two 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.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and policies.



### 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.

Staffing and recruitment

At our last inspection the provider had failed to ensure staffing was arranged to ensure people's needs were met. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- There was enough staff on duty. Improvements had been made to continually monitor staffing levels. The manager was able to demonstrate sustainability in these improvements for example by working on recruitment and retention of staff.
- People and their relatives told us there were enough staff. People told us that staff were there for them and attended to their needs when they requested in a timely manner.
- The home had a recruitment process and checks were in place. These demonstrated that staff had the skills, knowledge and character needed to care for people. Staff files contained records of appropriate checks, such as references, health screening and a Disclosure and Barring Service (DBS) check. The DBS checks people's criminal record history and their suitability to work with people in a care setting.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Fairlawn and relatives said their loved ones were safe and well cared for. Comments we received were: "I think my relative [name] is safe there, they are so kind to them", "I feel my loved one [name] is safe there because they [staff] are always around", "I feel safe, and safer here because if I need help or if something is wrong I only have to ask".
- Staff had received training in safeguarding people and told us the signs and symptoms that may indicate someone was at risk. They told us who they would report to both within the home and externally. Staff were confident in the management of the home that they would act if needed to protect someone from harm.
- The manager and deputy manager worked with the local authority safeguarding team as necessary and had made referrals when needed.

Assessing risk, safety monitoring and management

- Risk assessments were in place for all aspects of people's care and support. Risk assessments were reviewed monthly to check for accuracy and changes made where necessary.
- Risk assessments gave clear instructions for staff. The assessment was arranged to show the care the person needed and what the risks were. The assessment then gave instructions to the staff of safe ways to

work to reduce or eliminate risks.

- Risk assessments were in place where people had specific needs such as where bed rails were used, or a person was at a higher risk of falls.
- Staff had a good knowledge of people's risks. Records showed that care was delivered in line with people's individual risk plans, this meant the risks to people were reduced.

#### Using medicines safely

- Medicines were managed safely within the home and people received their medicines as prescribed.
- The home had arrangements in place for ordering, storage and disposal of medicines. Staff responsible for medicines had their competency assessed.
- Records were kept on an electronic system which alerted the manager is medicines as prescribed as an extra safeguard.
- Where people were prescribed medicines that they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicines that required stricter controls by law were stored correctly in a separate cupboard and a stock record book was completed accurately.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Learning lessons when things go wrong

- Accidents and incidents were recorded, and analysis had taken place monthly to identify trends and used as learning within the service. The deputy manager told us they held meetings to examine different areas and events within the home. They told us it was important to include all of the staff team in analysing events and learning lessons.
- Learning was shared through staff handovers and meetings. Staff told us they communicated well together within the home and were kept up to date with changes.



### 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.

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

- Quality assurance systems in place were robust to monitor the standard of care provided. We saw sustained completion of audits and checks on an electronic system.
- Audits reviewed different areas of the home and care at different frequencies. Actions were taken to make improvements that had been identified. The system in place allowed the provider to have additional oversight of the home.
- Systems were in place to support learning and reflection for example the information collected each month formed part of quality reviews and meetings held by the provider.
- The manager and deputy manager knew about their duty to send notifications to external agencies such as the local authority safeguarding team and CQC where required. This is a legal requirement to allow other professionals to monitor care and keep people safe.

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

- Staff felt proud to work at Fairlawn. They were complimentary about the home, each other and the management. Some of their comments included; "It's like one big, happy family here, there is a friendly atmosphere". "The culture is friendly and supportive. We are good at supporting each other". "I think it's a friendly home". "You get appreciated for doing things, the staff have been really nice to me".
- Staff, relative's and people's feedback on the management of the home was positive. People felt confident in them, staff felt appreciated and valued. Some of the comments included; "I go to the deputy manager [name], they sort things out". "The new manager is nice, open and answers your questions". The manager [name] is very approachable, they always check we are alright". "The deputy manager [name] is always happy to listen". The deputy manager [name] is absolutely brilliant". "The people I work with are great. The manager [name] is fantastic".

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 manager and deputy manager understood the requirements of the duty of candour, that is, their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm. They told us the circumstances in which they would make notifications and referrals to external agencies and showed us records where they had done this.

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

- People, their relatives and staff were kept updated regularly by the management of the home. Throughout the Coronavirus pandemic there have been various restrictions and changes within the home. For example, visiting the home and meeting with loved ones. People and their relatives told us this has been managed well.
- Fairlawn has long standing connections with their local community which has been limited during the past twelve months. They have strengthened their activity within the home to ensure people feel involved and not isolated. A person told us, "Since Covid-19 it can't have been easy and they [staff and management] couldn't have done better so far".
- The manager had recently joined Fairlawn so had held various meetings with staff. They told us they wanted to continue and build on this. People and staff felt involved and told us the manager was visible within the home.
- The home had a good working relationship with health and social care professionals.