

Care UK Community Partnerships Ltd

Ferndown Manor

Inspection report

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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

Ferndown Manor is registered to provide nursing and personal care for up to 75 people. The service provides support to older people, some of whom are living with a dementia. At the time of our inspection there were 49 living at the home. Ferndown Manor is purpose built and accommodates people according to their needs across three separate floors.

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

Significant and sustained improvement had been made at Ferndown Manor since our last inspection. Developments to governance structures, risk management and staffing levels had improved safety within the home.

People and their families told us Ferndown Manor was safe and they felt well cared for. One relative said, "The ambiance at Ferndown Manor is one of a caring family. Apart from the obvious security in place, the carers ensure that my [relative] eats, is comfortable and that I am advised of any issues straight away."

People had been assessed for potential risks to their health, safety and well-being. Robust systems were in place to ensure assessments were regularly reviewed to ensure people were consistently protected from risks of harm. One person told us, "Yes I feel very safe, I couldn't ask for more."

Ferndown Manor had recruited staff safely into the service ensuring staff were of good character. There were enough staff to meet people's care needs. One person said, "I know the staff well, they know what they are doing and are all nice, I don't have any problems at all."

The home was clean and tidy. Systems were in place to protect people from the spread of avoidable infections. Medicines were administered by trained staff and managed safely.

People were supported to have maximum choice and control of their lives and staff them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service was well-led. Staff told us they were proud to work at Ferndown Manor and felt supported by the management team. Comments included: "I love my job and feel proud knowing I'm making a difference in someone's life", "This is the only home I would feel happy sending my own family members too, or even myself when the time comes" and, "I work in a positive working environment which enables all residents to have fulfilling enriched lives."

Governance systems to manage quality, risks and regulatory requirements were robust and effective. This meant any areas of improvement had been easily identified, and actions taken to drive improvements to consistently deliver good quality of care.

People, relatives and staff told us they found the registered manager and deputy manager's approachable. They felt listened to and knew if they did raise concerns they would be acted upon.

The registered manager and deputy manager were proud of Ferndown Manor, proud of the staff and proud to deliver person centred care to people living in the home. Leading by example, they told us how they were supporting one person to achieve their wish to try plane wing walking. We were shown a system of flower pictures which, when placed outside people's rooms communicated to staff when personal care was being delivered, if a person preferred female carers only and when a person needed assistance with their dentures. It was this type of dignified approach that contributed to a positive, open and inclusive culture of the service.

Health and social care professionals told us the home worked in partnership with them to deliver consistent, quality care. One healthcare professional said, "I have been to a few care homes in the area and I can honestly say that this one is one of the better ones."

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 22 July 2021).

Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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.

Ferndown Manor

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 and 1 specialist nurse advisor.

Service and service type

Ferndown Manor is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Ferndown Manor is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete 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 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.

During the inspection

We spoke with 8 people who used the service and 7 relatives about their experience of the care provided. We spoke with 19 members of staff including the registered manager, deputy manager, care staff and maintenance staff. We also spoke to 5 health and social care professional who had experience of the service.

We observed care to help us understand the experience of people who could not talk with us. We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and staff supervision and a variety of records relating to the management of the service.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Improvements had been made since our last inspection and there were enough staff to meet people's needs. One person said, "Yes there's enough staff, if I need something I press this bell and they come and help me."
- Staff had been recruited safely into the service with checks including full employment history, 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.
- Staff had received up-to-date training in all safety systems including fire safety, health and safety and moving and handling.

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

- Improvements had been since our last inspection and staff had a proactive approach to anticipate and manage risks to people living at the home. For example, risks to people's health, safety and well-being had been assessed and actions taken where needed to prevent them from harm.
- Staff were aware of risks to people and how to manage them. Staff shared information about risks consistently and reliably through daily handovers and meetings including, clinical review meetings.
- Accident and incidents were analysed and discussed in meetings. This meant any themes and trends could be identified for measures to be put in place to prevent further occurrences.
- There was an open culture of learning from mistakes, concerns, incidents and accidents. Learning from things that go wrong was shared with all staff. Examples of lessons learned were displayed on a board in the staffing area. Meeting minutes showed lessons were discussed in daily handovers and meetings with all staff.
- The building and equipment was regularly serviced and well maintained. People had personal emergency evacuation plans in place that provided key information to aid emergency services in the event of the building needing to be evacuated. Fire equipment was in good order and staff had completed fire training which included regular drill practice.

Systems and processes to safeguard people from the risk of abuse

- People were consistently safe and protected from harm. Staff had received training in safeguarding people and knew how to recognise signs and symptoms of abuse.
- Staff knew who to report concerns to within the home. Staff were confident their concerns would be listened to by the registered manager and knew who to report to outside the home if they were not.
- Ferndown Manor had made appropriate referrals to the local authority safeguarding team when needed

to ensure there was external scrutiny to check people were safe.

- People told us they felt safe, one person said, "Yes I feel safe, this is my home."

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Using medicines safely

- Medicines were managed safely. Systems and processes were in place to make sure people received their medicines safely and as prescribed. Staff were trained and assessed as competent to administer medicines. The management team regularly checked that staff were following policies to support people to take their medicines and record when medicines were given.
- Medicines were ordered, stored and disposed of safely and securely. Medicines administration records were clear, accurate and complete.
- Staff made sure that people's GP and other healthcare professionals were kept informed of any changes to a person's health and sought advice from specialists where needed.
- People's medicines were regularly reviewed by healthcare professionals to ensure they were still appropriate and required. This included medicines prescribed to people to manage their symptoms of distress when required.
- When required medicines had guidance in place to support staff to make consistent decisions to ensure medicines were administered appropriately.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- At the time of our inspection there were no visiting restrictions which was in line with current government guidance.

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 requires improvement. At this inspection the rating has changed 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

- Significant and sustained improvements had been made since our last inspection and Ferndown Manor was consistently well-led. The registered manager promoted a positive culture that was person centred, open, inclusive and empowering. People told us they knew the registered manager and felt listened to. We received comments from people such as: "[registered manager] always has time for you, you can talk to them about anything they're so kind", "[registered manager] is nice, they come and see me and I can always talk to them if I want to" and "I know I can always go and speak to [registered manager] if I want to."
- Relatives told us they knew who the registered manager was and knew they could go and speak with them. One relative said, "[registered manager] is always willing to speak with relatives and allay any concerns that we may have."
- Staff told us they felt supported by the registered manager to do their jobs well. One member of staff said, "[registered manager] is the best manager I have ever worked for. [registered manager] is calm, approachable, instructive and always on hand to listen and support the team."

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

- Improvements had been made since our last inspection and Ferndown Manor had clear, effective governance, management and accountability arrangements. A robust auditing system was in place to check procedures within the home were safe. For example, medicines, care records and people's well-being.
- Actions were recorded when areas of improvement had been identified. The registered manager checked staff had completed the actions within the agreed timescales.
- Quality performance reports completed monthly monitored the service for any themes and trends in relation to pressure ulcers, weight loss and falls. This meant areas of improvement could be identified, and measures be put in place to ensure people were safe and well cared for.
- The registered manager understood the importance and responsibility of their role and kept up to date with the latest good practice guidance. The registered manager told us they felt supported by the provider and this had contributed to achieving good outcomes for people.
- When things had gone wrong the registered manager had been open and honest as part of their duty of candour. They had sent notifications of certain events which happened in the home to CQC which is a legal requirement.

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

- People, relatives and staff were involved in the running of the home. Satisfaction surveys had sought the views and feedback from people. Where areas of improvements had been identified, actions had been taken to improve. For example, a survey showed people had not been satisfied with the food. A new chef was recruited, and people had been involved in the creation of the menus. Feedback from people following the change included, "Marked improvement."
- Relatives of people were asked for their views and invited to attend meetings at the home. The meetings held regularly were specifically for relatives to offer support and information.
- Staff were encouraged to share their suggestions at regular staff meetings.

Working in partnership with others

- Ferndown Manor worked in partnership with other agencies to deliver joined up care. For example, the home was hosting a, "living with diabetes" workshop. This was an information sharing event run by NHS specialists where people, visitors and staff could attend.
- We received positive feedback from healthcare professionals who regularly visited the service. One healthcare professional said, "[registered manager] has always been friendly and interacted well with me. Instructions have been listened to and implemented."