

Key inspection report

Care homes for older people

Name:	Friary House
Address:	26 Carlton Road North Weymouth Dorset DT4 7PY

The quality rating for this care home is:	one star adequate service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:
John Hurley	2 1 0 4 2 0 1 0

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Friary House
Address:	26 Carlton Road North Weymouth Dorset DT4 7PY
Telephone number:	01305782574
Fax number:	01305787811
Email address:	enquiries@kfcare.co.uk
Provider web address:	www.kfcare.co.uk

Name of registered provider(s):	Mr Michael Antony Fry
Name of registered manager (if applicable)	
Mr Peter Fry	
Type of registration:	care home
Number of places registered:	16

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	16
Additional conditions:		

Date of last inspection	2	9	0	4	2	0	0	9
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Brief description of the care home

Friary House residential care home for older people is established in a large detached property situated in a quiet residential area of Weymouth. It is close to local shops and is a short distance from Weymouth seafront and the town centre, which has a range of amenities, including a large weekly market, cinemas, theatre and comprehensive shops. It is one of two homes owned by Mr M Fry, the other home being Kingsley Court. Mr M Fry has been the registered proprietor since 1985 and his son Mr P Fry became the registered manager in 2001. The accommodation is arranged over three floors, accessed by a passenger lift and main staircase. The residents private rooms are situated on all levels; many are generously sized and all have en-suite facilities. Communal areas include a lounge and a separate dining room. The home is set in grounds surrounded by hedges and trees. The back garden has recently become accessible to the residents and is mainly lawn with mature apple trees. The front

Brief description of the care home

garden is attractively paved with available seating. Visitor parking is available on site and in the street. The current fees range from £474 to £525. Additional charges are made for hairdressing, chiropody, newspapers and taxi transport.

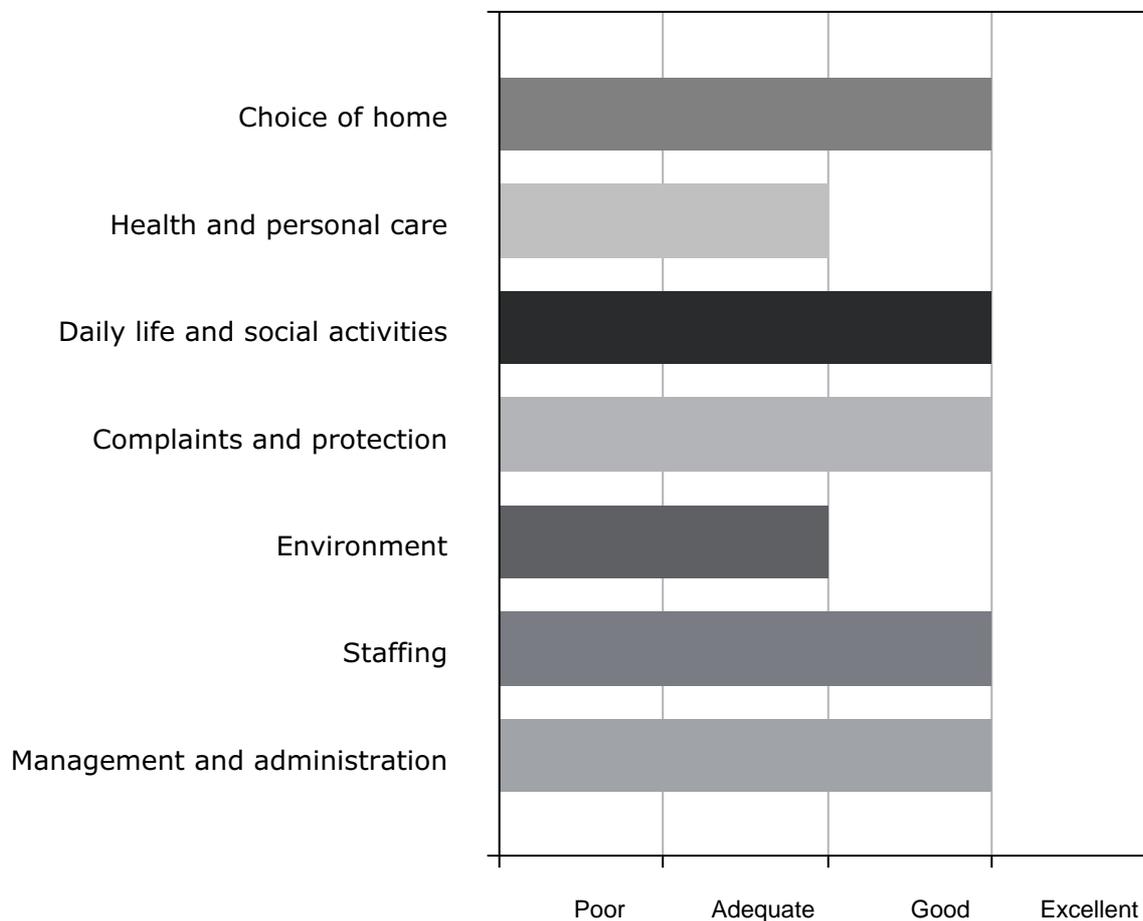
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

one star adequate service

Our judgement for each outcome:



How we did our inspection:

The inspection was undertaken over the course of one day at the end of May 2010. The focus of the inspection was to look at relevant key standards under the Commission for Social Care Inspection (now the Care Quality Commission) 'Inspecting for Better Lives 2 Framework'. This focuses on outcomes for residents' and measures the quality of the service under four headings; these are excellent, good adequate and poor. The judgment descriptors for the seven sections are given in the individual outcome groups and these are collated to give an overall rating for the quality of the service provided. We looked at two selected care files in detail, the staff files, undertook a tour of the building and looked at all the documentation relevant to the running of a care home. We sent out surveys to residents' and staff, where appropriate their comments are included in this report.

What the care home does well:

The home continues to provide a welcoming and friendly, homely environment. The registered manager is committed to making the improvements that are needed to bring the service they provide to the required standard. The people who live at the home inform us that staff are kind to them and treat them well. They said that their individual rooms met their needs and that the food is home cooked and of good quality. People important to those who live at the home say they can visit at any time within reason and consider that the staff at the home keep them informed of significant events as appropriate. The home provides many activities including many planned outings which appear to benefit the well being of those who live at the home.

What has improved since the last inspection?

The registered manager and staff have improved the way that prescribed creams are administered and have good recording systems in place to evidence that creams are being used as prescribed.

Of the 12 recommendations made at the last inspection only 2 remain active. This means that some personal risk assessments regarding self medication have improved. Infection control procedures have improved and the work recommended by the fire department has now been actioned to provide a safer environment for the people who live at the home.

What they could do better:

The registered manager needs to improve the homes approach to care planning, on going assessment and the review of the needs of those who live at the home so that people do not have unmet needs.

The home must improve its medication practices within the home so as not to put people at risk of harm. Similarly all risk assessments must be updated to ensure people are not at unnecessary risk of harm.

The hot water temperature must not put people at significant risk of harm from scalding.

The registered manager must ensure that all risk assessments are kept up to date and that systems are introduced to ensure that people are not put at risk through poor health and safety procedures, systems and risk assessments

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line 0870 240 7535.

Details of our findings

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Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home provides good information with regards to the services on offer.

More could be done to ensure that the initial assessment of need is more detailed so that the home can be confident it can meet the needs of the prospective resident.

Evidence:

We looked at the service user guide and found that it gives details about the staff and their qualifications. It describes the home and the facilities on offer in relation to the accommodation. It sets out the aims and objectives in relation to meeting people's needs through care planning and ongoing assessment, key terms and conditions in relation to taking up residency and an abridged version of the complaints procedure.

We looked at a sample of the pre admission assessments that had been carried out in relation to some of the people who had taken up residency to establish how the home had carried out the required needs assessment. The recording evidenced that an

Evidence:

assessment of need had been made prior to the person entering the home. This assessment covered areas such as medication, falls risk assessment, health and personal care.

The documents gave a reasonable start point with which to build a care plan covering areas in relation to the person's well being and how the home would assist them in the future. However it would be helpful if there was more detail on the pre admission forms in order to adopt a more robust recording system.

Staff told us that intermediate care is not a service that is offered at the home

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The care plans when available do not give staff clear instruction with regards to how to meet people's needs.

Care plans need to cover all areas of a person's well being and to be kept under review to ensure the person's needs are documented and met.

Medication administration practices and recording need to be improved to ensure people's needs are met.

Evidence:

We looked at three care plans in detail to establish what people's needs were and how they were met. We also spoke with the people and staff regarding these issues.

In one person's file their cultural and spiritual needs were noted, there was a long term assessment of need, activity plan and social interaction plan which appeared to have been achieved.

Evidence:

The file indicated the person has restricted mobility and required the use of bedrails to keep them safe at night. There was a care plan for the use of bedrails which was kept under review. They also have enduring mental health issues associated with old age which had impacted on their cognitive functioning. There was no care plan with regards to this issue.

Other areas of care planning associated with these two issues such as moving and handling, personal care, eating and drinking etc were not recorded, so there was no instructions to staff with regards to how these needs should be met.

We spoke with staff regarding this person's needs and established that they needed to be assisted to get in and out of bed by way of hoist. They also informed us that the person uses a special beaker to drink with and requires to have their food cut up. At meal times they need prompting as they "have a habit of falling asleep". We asked the staff if the person had any mental health needs they informed us "it's difficult to say".

Whilst it is reassuring to note that staff are aware of some of the issues that the person needs help with it is clear that the registered manager must provide staff with more guidance in the person's care file. This should ensure that the staff meet the needs in a person centered way and not a task centered way as described to us during the inspection.

Other files sampled indicate similar issues where some information is available but not all. This was more noticeable with regards to meeting the needs of people with mental health issues. We noted that risks are not always evaluated and so action to minimise any risks are not taken. For example in one care file it was recorded that a person with mental health needs had stated to staff that they had "wanted to kill themselves". The care plan had not been reviewed in light of these concerns so staff had insufficient guidance to ensure the person's needs were being met.

One recommendation from the last inspection advised that "it should be clearly evidenced that monthly reviews are undertaken with the service user and they should be asked if at all possible to sign their agreement with the care plan. Details of the review should be recorded". Again there was insufficient evidence to suggest that this recommendation had been acted upon. The need to carry out monthly reviews ensures that the changing needs and safety of those who use the service is constantly evaluated and recognised. Without this degree of vigilance it is possible for people to have unmet needs which may in turn cause unnecessary risks. The Medication Administration Records (MAR) were examined and found to be generally be kept in good order. The MAR sheets were kept in good order and contained some evidence of

Evidence:

good practice but this was inconsistent for example, all handwritten entry's were signed in by two people but the amount received was not always recorded undermining any audit trail.

It was noted that the instructions for the administration of medication had been altered by a member of staff at the home to read "Per required Needs" and not at set intervals throughout the day as dispensed. There was no evidence that the doctor had been consulted with regards to this change of medication regime or that staff had considered consulting them.

In general terms the records were reasonably well kept but monthly audits of the medication administration would help drive up standards in the home.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People's social and recreational needs are met.

The food on offer meets the needs of those who live at the home

Evidence:

People who use the service were observed in a number of different locations. They choose when to get up and when to retire. They have free access to their bedroom and communal facilities. Those who use the service are able to meet privately with visitors in their rooms. Those who were spoken with and could articulate their views indicated that they were happy with their life in the home and confirmed that the staff support them in following their preferred lifestyle.

On the day of the inspection all but two people who live at the home were going out on an organised trip. We were informed this is a monthly occurrence during the summer months. People who live at the home informed us that there are things to do and the pace of life suits them. We were informed by those who use the service that the food was always good and that choices were available. People told us that the staff knew people's likes and dislikes and as such were able to cater for their needs.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home has systems in place to ensure that the views of those who use the service are listened to

Evidence:

We looked at the complaints records and found that the management is recording complaints when they are received and investigating them as described in the service users guide.

The people who use the service informed us that they know who to speak to if they are unhappy and wish to complain.

The home has an Adult Protection policy that the home needs to be reviewed to ensure that it reflects the local authority's expectations with regards to this issue especially around when and if a person can consent to an issue being raised on their behalf.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Risks to people who live and work at the home need to be robustly assessed in a systematic fashion to ensure people are protected from harm.

Evidence:

The home was clean and tidy on the day of the visit and there were no unpleasant odours. Five residents' who completed our survey said that the home was always fresh and clean. People are encouraged to bring in personal possessions when they move into the home and to personalise their bedroom to reflect their individual preference and lifestyle. All the people we spoke to were satisfied with their private room and how staff respected their wishes as to how they wanted it to look. The home continues to use suitable industrial laundry equipment to be able to cope with the volume of laundry generated. There continues to be adequate supplies of clean linen. The laundry wall has now been covered and painted representing an improvement over last years inspection. Protective clothing is provided to staff i.e. disposable apron and gloves. We noted that there was several unguarded radiators and unrestricted window openings. We asked to see the risk assessments which were found to be out of date. As both of these issues pose a significant risk of harm to those that use the service appropriate risk assessments need to be carried out and action taken to minimise any risks found in order to protect those who use the service.

In the bathroom area we found that the hot water temperature to the sink outlets

Evidence:

exceeded 43 degrees centigrade but there was no warning of this displayed. This could mean that people could scald themselves.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are enough staff to meet people's needs. People living in the home were confident that they were well looked after.

Robust recruitment procedures were in place to protect people from the risk of unsuitable staff working at the home.

The manager needs to ensure that staff are deployed in such a way as to ensure people have a choice with regards to when they are assisted with a bath.

Evidence:

We looked at the staff rota that showed the role of each person. Residents' spoken to said that staff responded as soon as they could when they needed them. Seven people completed our survey, five people said that there were always staff available when they needed them and two said that there usually was. Six staff completed our survey, one said that there was never enough staff on duty to meet the needs of those who live at the home, two said that there was usually enough staff on duty and three said there always was. The staff comments were positive regarding their working conditions and relationship with the management of the home.

We looked at the staff files of two staff members. All the necessary checks had been undertaken before people started work. All staff had been given their own copy of the

Evidence:

General Social Care Council code of conduct and a contract of employment.

We looked at the training matrix for the home which evidenced that the home employs thirteen care staff, four of which (approximately 30%) have achieved qualification to at least NVQ level 2 standard. Three more members of staff are currently registered on an NVQ level 2 course. This represents an improvement in training since the last inspection.

We spoke to two care staff on the day of the inspection who confirmed that they were encouraged to undertake training. All staff who completed our survey said that they were offered relevant training to keep them up to date and help them meet the needs of individual residents.

The home has moved away from using a very basic induction checklist and now plans to use the Skills for Care induction for all new staff.

It was noted on the staff rota that one carer comes in two days a week on a Monday and Wednesday solely to assist people with a bath. We spoke to the manager about our concerns that this did not offer choice and was task centred. They agreed with our observations and undertook to revisit the way that people are assisted in the future.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is run by a committed and competent manager and deputy manager who have created an open and positive atmosphere whereby residents' feel confident and well cared for.

Risk assessments must be reviewed in a timely fashion to ensure the safety of those who live and work at the home.

Evidence:

The management of the home have responded well to the requirements made at the last inspection completing them all. They have also made a similar response to the recommendations that were made completing most of them.

The manager, Mr Fry has many years experience in caring for older people and is suitably qualified to manage the home. Residents' and staff spoken to and surveyed continued to consider that both Mr Fry and the deputy manager were approachable and supportive.

Evidence:

The home has an annual development plan which identifies work required, its cost and the timescale within which it will be completed. The management of the home meet on a formal basis to review this plan and ensure that where at all possible the plan is adhered too. The home no longer holds money on behalf of the residents it cares for. Systems were in place to check the fire equipment and emergency lighting on a regular basis. The fire risk assessment was in place which had been reviewed. As mentioned earlier the risk assessments relating to the environment need to be reviewed and updated to ensure the well being of those who live and work at the home. The home's current insurance certificate was on display and the home has a business and development plan in place.

The home gave us a training matrix that showed that staff undertake mandatory training in manual handling, first aid, health and safety and food hygiene

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	7	15	<p>The manager must ensure that care plans are completed in consultation with the individual are kept under review and cover all areas that effect the persons well being their representative</p> <p>To ensure that people do not have any unmet needs.</p>	30/06/2010
2	9	13	<p>The registered manager to make sure there are arrangements for the recording, safe administration of medicines received in the home. This refers to ensuring that the home follow the prescriber's instructions with regards to the administration of medication.</p> <p>to ensure people are given the medication that has been prescribed to them and accurate audit trials exist.</p>	30/06/2010

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
3	25	13	The registered manager must ensure that radiators and associated hot pipe work does not put people at risk of harm To protect people from the risk of harm	30/06/2010
4	25	13	The registered manager must ensure that the amount the windows open do does not put people at risk of harm To protect people from the risk of harm	30/06/2010
5	38	13	The registered manager must carry out comprehensive risk assessments and take action to minimise any risks established through this work To ensure the safety of those who live at the home	30/06/2010

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	3	It is recommended that when carrying out an initial assessment of need the person carrying out the assessment gets as much detail as possible to establish if the home can met the needs of the prospective resident.
2	18	The registered manager should consider updating the

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
		homes safeguarding adults policy to reflect the local authorities expectations on this issue.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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