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The Forbury

Inspection report

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Ratings

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

Summary of findings

Overall summary

The Forbury is a residential care home which provides accommodation and personal care for up to 40 older people. The service specialises in providing care for people with dementia. At the time of our inspection, 33 people were living at the home.

At the last inspection, the service was rated Good. At this inspection, we found the service remained Good.

People still felt safe living at The Forbury, and were clear how to raise any concerns about their safety or wellbeing. Staff had received training in, and understood, how to recognise and report abuse. The risks to people had been assessed, reviewed and plans implemented to control these and keep people as safe as possible. The staffing levels maintained enabled staff to safely meet people's individual needs. People received their medicines safely and as prescribed from trained staff.

Staff received the ongoing training and support needed to work safely and effectively. People's consent to care was sought, and their rights under the Mental Capacity Act 2005 understood and promoted. People's dietary and nutritional needs were assessed, recorded and managed with appropriate advice from nutrition specialists. People had support to access professional medical advice and treatment and attend routine medical appointments, where they needed this.

Staff approached their work in a kind and caring manner, and knew the people they supported well. People's contribution towards decision-making that affected them was actively encouraged. Staff understood and respected people's rights to privacy and dignity.

People received care and support shaped around their individual needs and requirements. They had support to participate in a variety of one-to-one and group activities. People and their relatives knew how to raise complaints with the provider, and felt comfortable doing so.

The management team promoted open communication with people, their relatives and the community professionals involved in their care. Staff were clear what was expected of them, and expressed enthusiasm for their work at the home. The management team completed audits and checks to assess and improve the quality of the service people received at The Forbury.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

The Forbury

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014

This inspection took place on 27 September 2017 and 3 October 2017 and was unannounced.

The inspection team consisted of one inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

As part of our inspection, we reviewed the information we held about the service. We contacted representatives from the local authority and Healthwatch for their views about the service and looked at the statutory notifications the registered manager had sent us. A statutory notification is information about important events which the provider is required to send to us by law.

During the inspection, we spoke with 12 people who used the service and two relatives. We also spoke with a social worker, two primary care nurse practitioners, a palliative care clinical nurse specialist, two district nurses and a healthcare assistant. In addition, we spoke with the provider, registered manager, deputy manager, one senior care staff and four care staff.

We looked at four people's care records, complaints records, medicines records, accident and incidents records, three staff members' recruitment records and records associated with the provider's quality assurance systems.

We also spent time in the communal areas of the home to observe how staff supported and responded to people.

Is the service safe?

Our findings

People still felt safe living, and receiving care and support, at The Forbury. One person told us, "I have absolutely no concerns about my safety and security; I trust everyone absolutely." Another person said, "It is marvellous here. I am well cared for and safe and secure at all times." People were clear who to approach if, at any time, they were worried about their personal safety or wellbeing. One person explained, "If I do have any worries or I am concerned about anything, I speak to [registered manager] and it is sorted immediately and my mind put at rest."

The provider continued to protect people from avoidable harm and abuse. Staff had received training in, and understood, how to recognise, respond to and report abuse. One staff member told us, "You're not to keep it (abuse) to yourself. You've got to tell a senior or management." Clear procedures were in place to ensure information about anyone at risk of or experiencing abuse was shared with appropriate external agencies, such as the local authority, police and CQC. Our records showed the provider had notified others, and conducted investigations into abuse concerns, in line with these procedures.

The management team had assessed, recorded and reviewed the potential risks to individual's safety and wellbeing, with their involvement. One person told us, "I do have a tendency to fall and we work together to prevent that." Plans were in place to manage the identified risks to individuals. For example, appropriate mobility equipment, pressure and movement sensors and consistent monitoring by staff were used to reduce one person's risk of falls. The registered manager closely monitored any accidents or incidents involving people living at the home, to learn from these and prevent reoccurrence.

People, their relatives and staff told us staffing arrangements at the home ensured people's individual needs could be met safely and appropriately. One person told us, "I get my medication on time always and if I need aid, it is always given quickly. I am never kept waiting." Another person said, "You've only got to ring the (call) bell and they (staff) are here." During our inspection visit, we saw there were enough staff to respond to people's individual needs and requests in a timely way.

People and their relatives told us people had the support needed to take their medicines safely and as prescribed. One person said, "I do have to take quite a lot of tablets and they (staff) make sure I get the right ones at the right time, so I do not have to worry." People's medicines were stored securely and handled and administered by trained senior staff in line with the provider's procedures.

Is the service effective?

Our findings

People, their relatives and community professionals involved in people's care still spoke positively about the knowledge and skills of staff, and their ability to effectively meet people's needs. A healthcare professional told us, "They (staff) are caring, efficient, adept and able – all the right things really. If they're not sure, they'll ask."

New staff underwent the provider's induction training to help them adjust to their new job roles. This provided the opportunity to work alongside more experienced colleagues, and covered the requirement of the Care Certificate. The Care Certificate is a set of minimum standards that should be covered in the induction of new care staff. Following induction, staff benefited from a rolling programme of training, based upon their duties and responsibilities, and the needs of the people living at the home. One member of staff told us, "They (provider) are very good here at keeping staff up to date with training." Staff also attended regular one-to-one meetings with the management team to receive feedback on their work, and identify any additional support they may need.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA. The provider had sought and recorded people's consent to care. The registered manager and staff had an appropriate understanding of people's rights under the MCA, and we saw evidence of mental capacity assessments and best-interests decision-making in people's care records. DoLS applications had been made based upon people's capacity and their individual care and support arrangements. Where DoLS authorisations had been granted, the registered manager understood the need to review and comply with any associated conditions.

People told us they had enough to eat and drink, and that staff supported them to choose between the meal options on offer. We observed lunch at the home, and saw people enjoyed a relaxed, social mealtime experience, with appropriate support to eat comfortably. One person told us, "I have really enjoyed my food; it is always good. I have to be helped now to eat, but they (staff) help me in a kind way and never rush me or make me feel awkward." The management team assessed, recorded and reviewed people's nutritional needs, and any associated risks, with appropriate specialist nutritional advice.

People and their relatives told us staff played a positive role in helping people maintain their health and access healthcare services when needed. People said they were able to see their GP without delay if they ever felt unwell. Healthcare professionals described their positive experiences of working with the registered manager and staff team. One healthcare professional told us, "I haven't got to worry about phoning back tomorrow to check if the things we've agreed have been done."

Is the service caring?

Our findings

People, their relatives and community professionals still felt staff approached their work with kindness and compassion. One person told us, "You are recognised for who and what you are here: a person with real needs and real feelings. Just because you are old, doesn't mean you don't have the same need to be cared for and treated with respect; here that is understood." Another person said, "I think this is a wonderful place. The carers are all so good and they all really do care; it's marvellous!" A relative told us, "I know they (staff) love [person's name], and that means a lot."

During our inspection visit, we saw staff adopted a gentle, patient and considerate approach towards their work. They greeted people warmly, took interest in what they had to say and took the opportunity to sit and chat with them. Staff were conscientious in monitoring people's movement around the home, to ensure their safety and wellbeing. People were clearly at ease in the home's environment, and responded well to their interactions with staff.

The provider, management team and staff encouraged people to participate in decisions that affected them, and to share their views about the service. During our inspection visit, we saw staff supporting people to make choices in their routine care, such as what they wanted to eat and drink. People told us they felt listened to by the staff and management team. The registered manager involved people in the initial assessment of their care and support needs, and consulted with them as their care plans were reviewed and updated. A suggestions box was provided in the entrance hallway, and monthly residents' meetings held as further ways of enabling people to share their thoughts and opinions on the service.

People and their relatives told us staff employed at The Forbury treated people with dignity and respect. One person said, "I think it's very well-run here. People (staff) are very approachable and if you ask them something, they explain it to you. That to me shows respect." Another person said, "I have never had any problems with my privacy at all. Everyone is very respectful of our person and dignity at all times." During our inspection visit, we saw staff addressed people in a polite, respectful manner and met their personal care needs discreetly.

Is the service responsive?

Our findings

People still received care and support at The Forbury which was flexible, and took into account their individual needs and requirements. One person told us, "They (staff) know me and how I like things, and they look after me with great care and are always kind. They all ask me about things and take account of me." Another person said, "I have a bath once a week, but I can have one whenever I want; I just have to ask." During our inspection visit, we saw staff were focused upon people's wishes and preferences, and adjusted their support to suit the individual.

People's care plans were individual to them, and covered a full range of needs. They included information about people's likes and dislikes, interests and their preferred daily routines, along with guidance for staff on meeting their care needs. Staff understood the need to follow people's care plans, and we saw them doing so during our time at the home.

People had support and encouragement from staff to participate in a range of group and one-to-one activities. A healthcare professional told us, "They (staff) are always doing activities or sitting and talking with people. They always seem to be interacting with people." During our inspection visit, we saw people, amongst other things, receiving Holy Communion, chatting with staff and friends, playing dominoes, watching a film and listening to music.

People and their relatives understood how to raise a complaint with the provider, and felt comfortable doing so. They told us they would approach the staff or registered manager with any concerns of this nature. The provider had a complaints procedure in place to promote fair and consistent handling of complaints. We saw that previous complaints received by the provider had been recorded, investigated and acted upon.

Is the service well-led?

Our findings

During our inspection, we met with the registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager demonstrated a good understanding of the duties and responsibilities associated with their post, including the need to submit statutory notifications in accordance with their registration with us. They described their work with a clear sense of enthusiasm, and told us they had the support and resources needed from the provider to successfully manage the service.

People, their relatives and community professionals spoke positively about the management of the service and their dealings with the management team. One person told us, "It is truly wonderful here - [I have] no complaints. I am very lucky to live here as I know it very popular because of the care." Another person said, "I am lucky to be here. It is such a marvellous place and they (staff) are all marvellous." They described free and open communication between themselves and the management team. During our inspection visit, we saw the registered manager and provider made themselves available to people and visitors, chatting with them in a friendly, relaxed manner.

The majority of staff felt well supported by an approachable management team and referred to the strong sense of teamwork within the service. One staff member told us, "We are working as a team and you're not afraid to talk to a senior or [registered manager]." Another staff member said, "I've never seen such good care. Everyone works as a team and helps each other." Most staff expressed confidence in the registered manager and the leadership and direction they provided. One staff member told us, "They (registered manager) are very good, do their job properly and work from the heart. They also make sure everyone else is doing their jobs properly, but they're fair."

The management team carried out audits and checks designed to help the provider monitor and improve the quality of the care people received. These included the distribution of feedback surveys to people, their relatives and community professionals involved in their care. The registered manager also analysed incidents, accidents, complaints and any safeguarding issues on a continual basis. In addition, monthly care plan and infection control audits were completed. These quality assurance activities had led to improvements in the service, including more frequent staff supervision meetings and improved falls analysis.