

The Fremantle Trust

Dell Field Court

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 13 September 2016. At which a breach of legal requirement was found. We found that there was not a sufficient number of staff available to meet people's needs.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to this breach.

We undertook a focused inspection on the 24 January 2017 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dell Field court on our website at www.cqc.org.uk.

Dell Field Court is a care home for older people with learning difficulties, dementia and physical frailty. The home has 40 beds split into three floors; each floor has its own dining area and lounge, the second floor unit was dedicated to people from Asian origin. On the day we inspected there were 35 people living in the home.

The home has a 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 and associated Regulations about how the service is run.

At our focused inspection on the 24 January 2017, we found that the provider had followed their plan and legal requirements had now been met.

We found that the provider had employed additional care staff and the use of agency staff had been reduced, staff had been deployed appropriately to meet people's needs.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve the safety to people who used the service.

Staff were deployed in sufficient number to meet the needs of people who used the service.

This meant that the provider was now meeting legal requirements and the service was safe

Good ●

Dell Field Court

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 was 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.

We undertook a focused inspection of Dell Field Court on 24 January 2017. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection 13 September 2016 had been made.

We inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting legal requirements in relation to this question.

The inspection was undertaken by 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.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements.

We spoke with six people who used the service and one relative, the deputy manager, the assistant manager, four care staff and one visiting health care professional. At the visit we looked at staffing rotas, dependency levels and recruitment records we also observed people having lunch on all three floors of the home.

Is the service safe?

Our findings

At our comprehensive inspection of Dell Field Court on 13 September 2016 we had concerns about the number of staff employed. We found that the service did not have sufficient staff deployed to meet people's needs, which resulted in people having to wait long periods of time to receive treatment and care.

This was a breach of 18 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 24 January 2017 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 18 (1) as described above.

People who used the service told us that they had seen improvements in staffing levels, comments included "Yes there is always someone you could call out for help", "People who work here are very helpful", "The girls are all very good not one of them that says I can't do it", "If I need something they come" and "The girls are very good at the moment I can't fault them."

The registered manager was not available on the day of our visit, we spoke to the deputy manager. They showed us that a recruitment plan was in place and that since the last inspection they had recruited one permanent and three bank care staff. They also told us that an on-going advert had been placed with a recruitment agency, but it was sometimes difficult to recruit staff of the right calibre.

We saw from staff rotas that an additional 'floating' member of staff was now working between the ground floor and first floor and the use of agency staff had reduced significantly. In addition to this cover arrangements had also been made for management staff that were on long term absence.

Staff told us that staffing levels had improved since the last inspection. Comments included "we have enough staff now" and "there is less agency staff and extra staff on shifts, so it's much better."

The deputy manager had reviewed the staffing levels in relation to the floors that provided care to the people with the highest care needs. The deputy manager told us they used a tool for assessing dependency levels across all three floors which is used to calculate staffing levels. We saw that results of this tool were sent to the providers head office on a regular basis.

However, the staff on the ground floor told us that they did not feel there was always enough staff on duty and that during the morning busy periods they felt rushed and that people had to wait to get assistance with personal care and breakfast. They told us "We make sure people are safe, but we are still overstretched" and "breakfast can be chaotic." We discussed this with the deputy manager who agreed to increase staffing levels on this floor with immediate effect.

We observed that the lunchtime meal was a sociable occasion with most people eating in the dining area. People had plenty to drink and their drinks were replenished throughout our visit. If any person needed support from staff to eat their meals then this was provided, staff did not appear to be rushed and people

seemed to be enjoying the food and the company of staff.

A healthcare professional who regularly visited the service told us that this was one of the best homes they worked with and that staff were always helpful and available. They also told us that the service managed health conditions well, especially in relation to prevention of pressure sores.